

Personal - Post agency
activity

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 26 FEBRUARY 1970	
1. SERIAL NUMBER 027630		2. NAME (Last-First-Middle) HIDALGO, BARTOLOME N. JR.				3. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 28 70	
4. NATURE OF PERSONNEL ACTION RETIREMENT (DISABILITY) UNDER CIA RETIREMENT DISABILITY SYSTEM		5. CATEGORY OF EMPLOYMENT REGULAR		6. FINANCIAL ANALYSIS NO. CHARGEABLE 0235 0620		7. LEGAL AUTHORITY (Completed by Office of Personnel) PL 86-363 Sec. 231	
8. FUNDS X 100 O 100 C 100		9. ORGANIZATIONAL DESIGNATION DDP/WH BRANCH 2 PANAMA SECTION		10. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.			
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 1318		13. CAREER SERVICE DESIGNATION D.			
14. CLASSIFICATION SCHEDULE (GS, GS, GS) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12 5		17. SALARY OR RATE \$15,173	
18. REMARKS <p>SUBJECT HAS SIGNED WAIVER FOR SICK AND ANNUAL LEAVE ACCUMULATING AFTER 28 FEBRUARY 1970.</p> <p>NOT Recommended in Agency Reserve Program due to Health & Financial in 13. Dulles W.H/P/S</p>							
19A. SIGNATURE OF REQUESTING OFFICIAL HENRY L. BERTHOLD, C/WH/PERS		DATE SIGNED 26 FEB 70		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER Paul M. Y. Lee		DATE SIGNED 27 FEB 70	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 45	20. EMPLOY CODE 10	21. DATES CODING NUMERIC ALPHABETIC	22. SENIOR CODE	23. INTEGRITY CODE	24. POSTERS CODE 1	25. DATE OF BIRTH MO DA YR 05 27 19	26. DATE OF GRADE MO DA YR
28. NTE EXPIRES MO DA YR	29. SPECIAL REFERENCE 1-ESC 2-ORGN 3-FICA 4-NONE	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA TYPE MO DA YR	33. SECURITY REG NO		
35. NET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	36. SERV COMP DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY TAR DESI PROV TEMP	39. FEGEL HEALTH INSURANCE CODE 0-WAIVER 1-YES	40. SOCIAL SECURITY NO		
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NONE 1-NONE IN SERVICE 2-BELONG IN SERVICE (LESS THAN 3 YEARS) 3-BELONG IN SERVICE (MORE THAN 3 YEARS)	42. LEAVE CAT CODE	43. FORM EXECUTED CODE 1-YES 2-NONE	44. FEDERAL TAX DATA CODE NO TAX EXEMPTIONS		45. STATE TAX DATA CODE NO TAX STATE CODE		
46. POSITION CONTROL CERTIFICATION				47. C.F. APPROVAL [Signature]		DATE APPROVED 3/4/70	

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC
DOWNGRADING AND
DECLASSIFICATION

SECRET

EMPLOYEE NOTICE OF RESIGNATION

RESIGN EFFECTIVE

(Date)

FOR THE FOLLOWING REASON

MAR 2 10 20 AM '70

MY LAST WORKING DAY WILL BE

DATE SIGNED

SIGNATURE OF EMPLOYEE

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, State, Zip Code)

403 Shiner Rock Rd.
Richfield, Maryland 20851

INSTRUCTIONS

Items 1 thru 7, and Items 9 thru 18a — The initiating office should fill in each of the referenced items. Items 3 thru 7 and 9 thru 18 require information which pertains *only* to the action requested, and NOT to the current status of the employee unless specific items remain unchanged.

Item 5 — "Category of Employment" should show one of the following entries:

Regular
Part Time
Temporary
Temporary-Part Time

Summer
Detail-Out
Detail-In

WAE
Consultant
Military

Item 9 — "Organizational Designations" should show *all* levels of organization pertinent to identifying the location of the position:

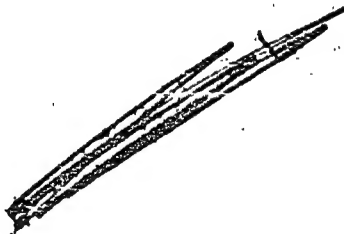
FIRST LINE
Major Component (Director, Deputy Director, etc.)
Office, Major Staff, etc.
Foreign Field or U.S. Field (if pertinent)
Division or Staff (subordinate to first line)
Branch
Section
Unit

Items 11 and 15 — "Position Title" and "Occupational Series" should be the standard abbreviated title and corresponding occupational series in Handbook of Official Occupational Titles and Codes for the duties actually to be performed by the employee. If different from the title and series of the position occupied as shown on the most current edition of the Position Control Register or Form 261, Staffing Complement Change Authorization, explain under Item 18—Remarks.

Item 18b — Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, the *gaining Career Service* should approve and the other Career Service should concur in Item 18, Remarks.

ROUTING— The original only of this form will be forwarded to the Office of Personnel *through* the appropriate Career Service official(s). In the case of requests specified in HB 20-800-1, which require advance approval of or notification to the Office of Security or the Office of Finance, one copy only will be sent to the Office(s) concerned.

SECRET



MEDICAL

2 JUL 1969

MEMORANDUM FOR: Mr. Balmes N. Hidalgo, Jr.

SUBJECT : Exceptional Service Emblem

1. Your request for consideration to receive the Exceptional Service Emblem has been reviewed by this office to determine your eligibility for the award. With considerable regret, I must concur in the assessment that the injuries you suffered in the line of duty do not fall under the special criteria governing award of the Exceptional Service Emblem. Hazardous duties, in the meaning of the governing regulation, relate to duties performed in areas in which internal strife, civil disturbances or hostile action by armed forces or persons unfriendly to the United States were present at the time the injury was incurred, or, relate to duties performed in an assignment defined as hazardous due to unusual geographic or other natural conditions.

2. You may be sure that this decision has been based upon thoughtful deliberation. Please accept my personal thanks for a job well done under difficult conditions.

Robert C. Wattles
Director of Personnel

Distribution:

- 0 - Addressee
- 1 - C/WH/Pers
- 1 - OPF/Hidalgo
- 1 - D/Pers
- 2 - BSD/HMAB

SECRET

24 June 1969

MEMORANDUM FOR: Baltes N. Hidalgo

VIA : WA/RMO

SUBJECT : Records Officer Appointment

1. In accordance with a request received from your component, you are hereby appointed a Records Officer in the Clandestine Services. Your functions are described, in summary, in CSI 70-1, Para. 4.d. You have also participated in a training course in which these functions were reviewed in some detail.

2. The essence of your appointment is that you now occupy a position of trust in which you are expected to draw on your knowledge and experience to exercise responsible and sound judgment in building and maintaining a professionally useful records system in the Clandestine Services. You are, at the same time, expected to train and guide others within your component in these respects.

3. A copy of this memorandum will be placed in your official personnel folder.


EDWARD A. MARELIUS
DDP Records Management Officer

cc: Personnel File of Addressee

SECRET

GROUP I
Excluded from automatic
downgrading and
declassification

SENSITIVE OPERATIONAL
1968

SECRET

(When Filled In)

438

REQUEST FOR PERSONNEL ACTION										DATE PREPARED	
1. SERIAL NUMBER: 027630										10 August 1966	
2. NAME (Last-First-Middle): HIDALGO, EMILIO N., JR.											
3. NATURE OF PERSONNEL ACTION: DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM										4. EFFECTIVE DATE REQUESTED: MONTH 08, DAY 14, YEAR 66	
5. CATEGORY OF EMPLOYMENT: REGULAR											
6. FUNDS: <input checked="" type="checkbox"/> V TO V, <input type="checkbox"/> V TO C, <input type="checkbox"/> C TO V, <input type="checkbox"/> C TO C										7. COST CENTER NO. CHARGE: 7235-0620	
8. LEGAL AUTHORITY (Completed by Office of Personnel): PL 88-643 Sect. 203											
9. ORGANIZATIONAL DESIGNATIONS: DDP/WH										10. LOCATION OF OFFICIAL STATION: WASHINGTON, D.C.	
11. POSITION TITLE:										12. POSITION NUMBER:	
13. CAREER SERVICE DESIGNATION: D											
14. CLASSIFICATION-SCHEDULE (GS 18, 19, 20):										15. OCCUPATIONAL SERIES:	
16. GRADE AND STEP: 12										17. SALARY OR RATE: s	
18. REMARKS: YOU ARE HEREBY NOTIFIED OF YOUR RIGHT TO APPEAL THIS ACTION TO THE DIRECTOR OF CENTRAL INTELLIGENCE IN ACCORDANCE WITH THE PROVISIONS OF HR 20-50. SUCH APPEAL MUST BE RECEIVED IN THE OFFICE OF THE DIRECTOR WITHIN 30 CALENDAR DAYS FROM THE EFFECTIVE DATE OF THIS ACTION.											
18A. SIGNATURE OF REQUESTING OFFICIAL:				DATE SIGNED:		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER:				DATE SIGNED:	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING: NUMERIC, ALPHABETIC		22. STATION CODE	23. INTEGRATE CODE	24. MOOTHS CODE	25. DATE OF BIRTH: MO, DA, YR	26. DATE OF GRADE: MO, DA, YR	27. DATE OF LEI: MO, DA, YR		
28. RTE EXPIRES: MO, DA, YR	29. SPECIAL REFERENCE	30. RETIREMENT DATA: 1-ESC, 2-FYR, 3-NONE		31. SEPARATION DATA CODE	32. CORRECTION, CANCELLATION DATA: TYPE, MO, DA, YR		33. SECURITY REG NO			34. SER	
35. VET PREFERENCE: 1-NONE, 2-1 PT, 3-10 PT			36. SERV COMP DATE: MO, DA, YR	37. LONG COMP DATE: MO, DA, YR	38. CAREER CATEGORY: CAR RESP, PROB, TEMP	39. FEGLI HEALTH INSURANCE: CODE, 1-YES, 2-NO	40. SOCIAL SECURITY NO				
41. PREVIOUS GOVERNMENT SERVICE DATA: CODE, 1-NO PREVIOUS SERVICE, 2-BREAK IN SERVICE (LESS THAN 3 YEARS), 3-BREAK IN SERVICE (MORE THAN 3 YEARS)				42. LEAVE CAT CODE	43. FEDERAL TAX DATA: CODE, NO. TAX EXEMPTIONS		44. STATE TAX DATA: CODE, NO. TAX EXEMPTIONS		45. POSITION CONTROL CERTIFICATION		
46. O.P. APPROVAL: See memo signed by D/Pers dated 26 JUL 1966				DATE APPROVED:							

1152
3-7-66

USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

SECRET

REQUEST FOR PERSONNEL ACTION										DATE PREPARED	
1. SERIAL NUMBER 027630										10 DECEMBER 1965	
2. NAME (Last, first, middle) HIDALGO, BAYLES N.											
3. NATURE OF PERSONNEL ACTION REASSIGNMENT					4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR DEC 19 65			5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS X V TO V O TO V					7. CENTER NO. CHARGE 6235 - 0620			8. LEGAL AUTHORITY (If employed by (Name of Personnel))			
9. ORGANIZATIONAL DESIGNATIONS DOP/WH BRANCH 2 PANAMA SECTION					10. LOCATION OF OFFICIAL STATION WASHINGTON, D. C.						
11. POSITION TITLE OPS OFFICER (GS-12)					12. POSITION NUMBER 1318			13. CAREER/SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (G.S. 1.B. ch.) GS					15. OCCUPATIONAL SERIES 0136.01			16. GRADE AND STEP 12 -2			
17. SALARY OR RATE \$-10,987											
18. REMARKS FROM: WH/C/MIAMI OPS BR/FT SECTION/5235 - 1162/1145/WASHINGTON, D. C.											
<div style="float: right; border: 1px solid black; padding: 5px;">Recorded by CSPD <i>Sgt</i></div> <div>1 - FINANCE</div>											
19A. SIGNATURE OF REQUESTING OFFICER ROBERT D. CASHMAN C/WH/PERSONNEL					DATE SIGNED 12 DEC 65		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>			DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 37	20. EMPLOY CODE 11	21. OFFICE CODING NUMERIC ALPHABETIC 57370 WH 1318		22. S/N OR CODE	23. INTEGRAL CODE	24. HOURS CODE	25. DATE OF BIRTH MO DA YR	26. DATE OF GRADE MO DA YR	27. DATE OF LSI MO DA YR		
28. NTE EXP. RES MO DA YR	29. SPECIAL REFERENCE 1-CSC 2-PICA 3-ROSE	30. RETIREMENT DATA CODE		31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA MO DA YR	33. SECURITY REG UP EOD DATA			34. SEX		
35. VET PREFERENCE CODE 0-NONE 1-1 PT 2-10 PT	36. SERV COMP DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY CODE	39. HEALTH INSURANCE CODE 0-NONE 1-YES 2-NO	40. SOCIAL SECURITY NO.						
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NONE 1-NO PREVIOUS SERVICE 2-BEARS IN SERVICE (LESS THAN 3 YEARS) 3-BEARS IN SERVICE (MORE THAN 3 YEARS)				42. LEAVE EXT CODE	43. FEDERAL TAX DATA CODE 1-YES 2-NO			44. STATE TAX DATA CODE NO TAX DEDUCTIONS 1-YES 2-NO			
45. POSITION CONTROL CERTIFICATION					46. OFF APPROVAL <i>[Signature]</i>			DATE APPROVED 12/15/65			

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

CONFIDENTIAL
(When Filled In)

NOTICE OF LONGEVITY COMPUTATION DATE		<input checked="" type="checkbox"/> VOUCHERED
		<input type="checkbox"/> INVOICED
NAME (Last, First, Middle)		SERIAL NUMBER
HIDALGO B N Jr		027630
OFFICE (and division)		
DDP/WH		
<input type="checkbox"/> ORIGINAL	LONGEVITY COMPUTATION DATE	
<input checked="" type="checkbox"/> CORRECTION	02-15-52	
THIS DATE	SIGNATURE (Office of Personnel)	
12-13-65	[Signature]	
FORM 171a 11-59	CONFIDENTIAL	(4)

SECRET

REQUEST FOR PERSONNEL ACTION										DATE PREPARED	
1. NAME (Last-First-Middle) W. J. 30										23 October 1964	
2. NATURE OF PERSONNEL ACTION CAREER					4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 11 1 1964			3. CATEGORY OF EMPLOYMENT CAREER			
6. FUNDS		V TO V C TO V		V TO C C TO C		7. COST CENTER NO. CHARGE ABLE 235-1162		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
5. ORGANIZATIONAL DESIGNATIONS DDP Special Affairs Staff Counter-Intelligence Staff Operations Section					10. LOCATION OF OFFICIAL STATION Washington, D.C.						
11. POSITION TITLE OPN OFFICER					12. POSITION NUMBER 037			13. CAREER SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (G.S. 18, on 1) 15				15. OCCUPATIONAL SERIES 015-01		16. GRADE AND STEP 12 (1)		17. SALARY OR RATE \$10,200			
18. REMARKS From: WFF/SAS/CS/S Rev. 436 Security Interest: 10/28/64 10/12/64 1 of Security Recorded by CSPD ref photo for 11/12/64											
19. SIGNATURE OF APPROVING OFFICIAL [Signature]					DATE SIGNED 10/29/64		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER			DATE SIGNED 10-30-64	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 3710		20. EMPLOY CODE 10		21. OFFICE CODING NUMERIC ALPHABETIC 19150 5-AS		22. STATION CODE 75013		23. INTEREST CODE		24. MOTIVS CODE 1	
25. DATE OF BIRTH MO DA YR 05 27 19		26. DATE OF GRADE MO DA YR		27. DATE OF LEI MO DA YR		28. DATE OF LEI MO DA YR		29. DATE OF LEI MO DA YR		30. DATE OF LEI MO DA YR	
28. NTE EXPIRES MO DA YR		29. SPECIAL REFERENCE 1-CX 2-FILA 3-NONE		30. RETIREMENT DATA CODE		31. SEPARATION DATA CODE		32. CORRECTION CANCELLATION DATA TYPE MO DA YR		33. SECURITY REQ NO	
35. VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT		36. SERV COMP. DATE MO DA YR		37. LONG COMP. DATE MO DA YR		38. CAREER CATEGORY CODE LAW/RES PROV TEMP		39. REG. HEALTH INSURANCE CODE A-WHILE B-YES		40. SOCIAL SECURITY NO	
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NONE 1-BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)				42. LEAVE CAT CODE		43. FEDERAL TAX DATA CODE 1-YES 2-NONE 3-NO				44. STATE TAX DATA CODE 1-YES 2-NONE 3-NO	
45. POSITION CONTROL CERTIFICATION [Signature]						46. O.P. APPROVAL [Signature]			DATE APPROVED 10-30-64		

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

SECRET

REQUEST FOR PERSONNEL ACTION										DATE PREPARED 9-11-64	
1. SERIAL NUMBER 027733		2. NAME (Last-First-Middle) L. DALLO, B. N. Jr.									
3. NATURE OF PERSONNEL ACTION MILITARY APPOINTMENT (Continued)						4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 02 15 64		5. CATEGORY OF EMPLOYMENT REGULAR			
6. HOURS I. VJOV C. 10V		VJOV C. 10V		7. COST CENTER AND CHARGE AMP 4237-1000-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)					
9. ORGANIZATIONAL DESIGNATIONS DDP Special Affairs Staff OS/CS Development Complement						10. LOCATION OF OFFICIAL STATION Washington, D.C.					
11. POSITION TITLE OPS OFFICER						12. POSITION NUMBER XXXX 7777		13. CAREER SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, FS, etc.) GS				15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12 (1)		17. SALARY OR RATE \$9000			
18. REMARKS * 0 40. For medical reasons. Not to exceed one year. For duration of period that the individual is on sick leave; not to exceed one year. Kushner for SCs 13/59 1 by Payroll; 1 by Security										Recorded by CSPD RPH	
19A. SIGNATURE OF REQUESTING OFFICER C. L. DALLO, JR. 13 April 64				DATE SIGNED 13 April 64		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER George H. Liment 13 April 64				DATE SIGNED 13 April 64	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE 13		20. EMPLOY CODE 10		21. OFFICE CODING NUMERIC ALPHABETIC 4447 SAS		22. STATION CODE 78613		23. INTEREST CODE		24. MONTHS CODE 1	
25. DATE OF BIRTH MO DA YR 02 15 64		26. DATE OF GRADE MO DA YR 12 22 63		27. DATE OF LEL MO DA YR 12 22 63		28. SECURITY REG. NO. 00000		29. SEX M			
30. RETIREMENT DATA 1-YES 2-YES 3-NO		31. SEPARATION DATA CODE		32. CORRECTION CANCELLATION DATA TYPE MO DA YR		33. EOD DATA EOD DATA		34. SPECIAL SECURITY NO.			
35. VET PREFERENCE CODE 0-NO 1-5 PT 2-10 PT		36. SERV COMP DATE MO DA YR 12 22 63		37. LONG COMP DATE MO DA YR 12 22 63		38. CAREER CATEGORY CODE P		39. FEEL HEALTH INSURANCE CODE 1-YES 2-NO		40. SPECIAL SECURITY NO.	
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 1 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)				42. LEAVE CAT CODE 1-YES 2-NO		43. FEDERAL TAX DATA CODE 0 FORM SUBMITTED 1-YES 2-NO		44. STATE TAX DATA CODE 0 FORM SUBMITTED 1-YES 2-NO		45. POSITION CONTROL CERTIFICATION	
46. OP APPROVAL George H. Liment 13 April 64						DATE APPROVED 13 April 64					

1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

SECRET

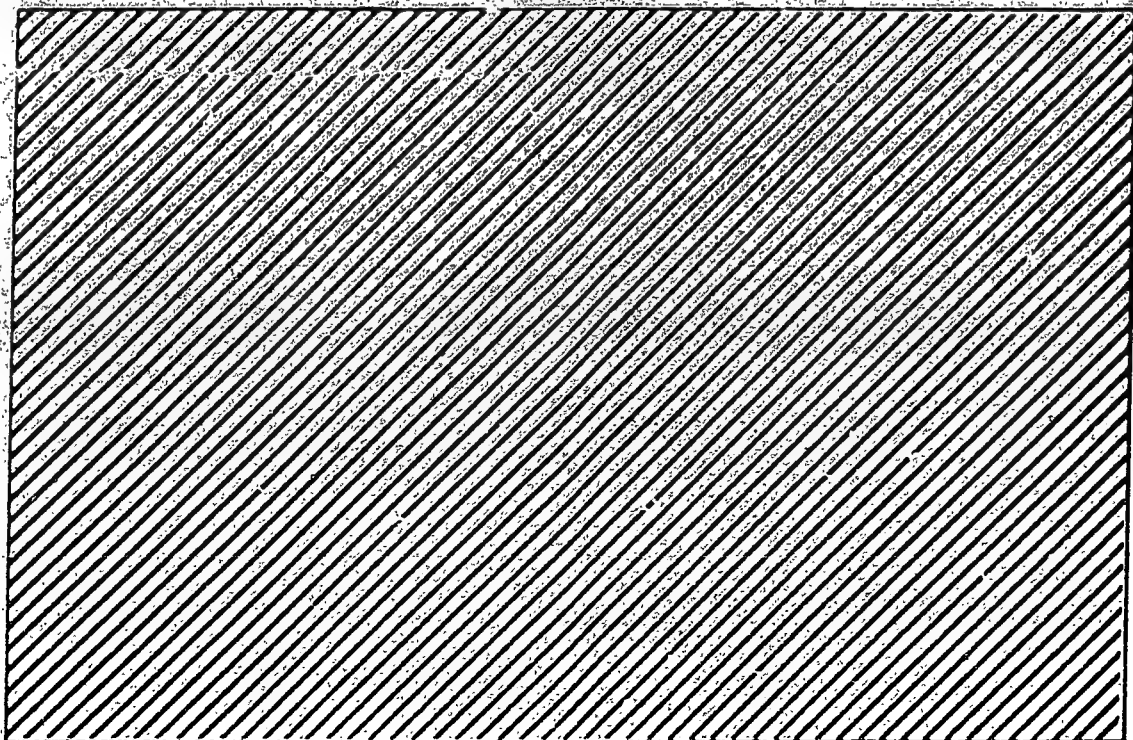
18 Nov 1964

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER 027630		2. NAME (Last, First, Middle) Hidalgo, B. J.		3. DATE PREPARED 9 April 1964	
3. NATURE OF PERSONNEL ACTION Rise from MOS		4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 04 01 64		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS V TO V C TO V I C TO C		7. COST CENTER NO. CHARGE 4132-2001-100		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS 40 JCS/Operational Staff U. S. Field Forward Operations Station - JMWAVE CI Section		10. LOCATION OF OFFICIAL STATION JMWAVE			
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 073		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE / GS, ZB, etc. JS		15. OCCUPATIONAL SERIES 0135.01		16. GRADE AND STEP 12 (1)	
17. SALARY OR RATE \$ 0000		18. REMARKS <div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 10px auto;">Reviewed by LORD [Signature]</div> 1 by Security 1 by Payroll			
19. SIGNATURE OF REQUESTING OFFICIAL [Signature] ORVILLE C. DUNN, JR. USAF/OPS		DATE SIGNED 9 April 64		18. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Signature] DATE SIGNED 12 April 64	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 45	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC	22. STATION CODE	23. INTEGREE CODE	24. HQS CODE
25. DATE OF BIRTH MO DA YR 05 07 19	26. DATE OF GRADE MO DA YR	27. DATE OF LET MO DA YR	28. DATE OF LEAVE MO DA YR		
29. NTE EXPIRES MO DA YR	30. SPECIAL REFERENCE 1-CSE 2-IFCA 3-NONE	31. RETIREMENT DATA CODE	32. SEPARATION DATA CODE	33. CORRECTION CANCELLATION DATA TYPE MO DA YR	34. SECURITY REQ NO
35. VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT	36. SERV COMP DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER CATEGORY CAR RES PROV TEMP	39. FEGLI HEALTH INSURANCE CODE CODE 0-BS RLE 1-RES	40. SOCIAL SECURITY NO
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (1 TO 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)	42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE 1-YES 2-NO	44. STATE TAX DATA FORM EXECUTED CODE 1-YES 2-NO	45. POSITION CONTROL CERTIFICATION [Signature] DATE APPROVED [Signature]	

SECRET

EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET



NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT	CLAIM NUMBER
HIDALGO, BALMES N.	self	60-264

There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on 30 May 1960. Broken left foot.

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE	SIGNATURE OF REPRESENTATIVE
	<i>B. De Felice</i>

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED							
1. SERIAL NUMBER		2. NAME (Last-First-Middle)								18 April 1963							
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE REQUESTED				5. CATEGORY OF EMPLOYMENT											
EXCITED APPOINTMENT		06 28 63				PERJLAP											
6. FUNDS		7. COST CENTER NO. CHARGE		8. LEGAL AUTHORITY (Completed by Office of Personnel)													
CF TO V		3132-2001-1000															
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION															
DDP/Special Affairs Staff U. S. Field Forward Operations Station - JMWAVE CI Section		JMWAVE															
11. POSITION TITLE		12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION													
OPS OFFICER		0732		D													
14. CLASSIFICATION SCHEDULE (GS, LP, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE											
GS		0136.01		11 (4)		\$ 8840											
18. REMARKS																	
19. SIGNATURE OF REQUESTING OFFICIAL												DATE SIGNED		19. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED	
Louis W. Armstrong												18 Apr 63				11 Apr 63	
LOUIS W. ARMSTRONG, C/SAS/Rate																	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
20. DATE OF BIRTH		21. OFFICE CODE NO.		22. STATE CODE		23. DATE OF BIRTH		24. DATE OF BIRTH		25. DATE OF BIRTH		26. DATE OF BIRTH		27. DATE OF BIRTH			
13 10		61770 SAS		9449		25 12 19		25 12 19		25 12 19		25 12 19		25 12 19			
28. DATE EXPIRES		29. SPECIAL REFERENCE		30. AID ELEMENT DATA		31. SEPARATE DATA CODE		32. COEFFICIENT INCREASE AT ON DATA		33. DATE OF BIRTH		34. DATE OF BIRTH		35. DATE OF BIRTH			
				1						27 12 19		27 12 19		27 12 19			
36. 1ST PREFERENCE		37. 2ND PREFERENCE		38. 3RD PREFERENCE		39. CAREER CATEGORY		40. 1ST PREFERENCE		41. 2ND PREFERENCE		42. 3RD PREFERENCE		43. 4TH PREFERENCE			
1 - NO		2 - NO		3 - NO		1		1		1		1		1			
44. PREVIOUS EMPLOYMENT SERVICE DATA		45. FEDERAL TAX DATA		46. STATE TAX DATA		47. FEDERAL TAX DATA		48. STATE TAX DATA		49. FEDERAL TAX DATA		50. STATE TAX DATA		51. FEDERAL TAX DATA			
1		1		1		1		1		1		1		1			
49. POSITION CONTROL CERTIFICATION														APPROVED			
25 12 19														25 12 19		25 12 19	

Non-Filled in

FORM 1152 PREVIOUS EDITIONS
AND FORM 1152a.

GROUP 1

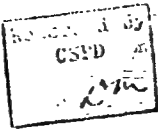
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RZR: 25 APR 63

NOTIFICATION OF PERSONNEL ACTION							
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)					
027630		HIDALGO B N JR					
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
RESIGNATION				04 27 63		REGULAR	
6. FUNDS		7. V TO V		8. V TO CP		9. COST CENTER NO. CHARGEABLE	
X		CP TO V		CP TO CP		3232 1000 1000	
10. ORGANIZATIONAL DESIGNATIONS				11. LOCATION OF OFFICIAL STATION			
12. POSITION TITLE				13. POSITION NUMBER		14. SERVICE DESIGNATION	
OPS OFFICER				0682		D	
15. CLASSIFICATION SCHEDULE (GS, LO, etc.)		16. OCCUPATIONAL SERIES		17. GRADE AND STEP		18. SALARY OR RATE	
GS		0136.01		11 4		8840	
19. REMARKS							
SIGNATURE OR OTHER AUTHENTICATION							

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER 027630				11 December 1963	
2. NAME (Last, First, Middle) [REDACTED]				3. NATURE OF PERSONNEL ACTION PROMOTION	
4. EFFECTIVE DATE REQUESTED 12-1-63				5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS V TO V CF TO V		7. COST CENTER NO. CHARGEABLE 4132-2001-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DEP Special Affairs Staff U. S. Field Forward Operations Station - JMWAVE CI Section				10. LOCATION OF OFFICIAL STATION JMWAVE	
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER 0731	
13. CAREER SERVICE DESIGNATION D				14. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS	
15. OCCUPATIONAL SERIES (87) 0136.01				16. GRADE AND STEP 12 (1)	
17. SALARY OR RATE 9475				18. REMARKS	
<div style="text-align: right;">  </div>					
19A. SIGNATURE REQUESTING OFFICIAL CRVILLE C. HANSON, S/SAS/Pers.		DATE SIGNED 12/11/63		19B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Signature]	
DATE SIGNED 12/11/63					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
19. ACTION CODE 22	20. EMPLOY CODE 10	21. OFFICE CODE 4970	22. STATION CODE SAS	23. GRADE AND STEP 12 (1)	24. DATE OF ACTION 12/12/63
25. VET. PREFERENCE 1 - NONE 2 - 4 yr 3 - 8 yr 4 - 12 yr	26. SER. COMP. DATA CA. 1A	27. LONG. COMP. DATA CA. 1A	28. CAREER CATEGORY 1 - 1A 2 - 1A 3 - 1A	29. DATE OF ACTION 12/12/63	30. DATE OF ACTION 12/12/63
31. ACTION CODE 1 - NO PREVIOUS SERVICE 2 - NO DATA IN SERVICE 3 - DATA IN SERVICE (LESS THAN 5 YRS) 4 - DATA IN SERVICE (MORE THAN 5 YRS)		32. DATE OF ACTION 12/12/63		33. DATE OF ACTION 12/12/63	
34. POSITION CONTROL CERTIFICATION [Signature]		35. D.P. APPROVAL [Signature]		36. DATE APPROVED 12/12/63	

FORM 1152 (REPLACES FORMS 1152-1 AND 1152-2)

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC
DOWNGRADING AND DECLASSIFICATION

(4)

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
1. SERIAL NUMBER 027630		2. NAME (Last-First-Middle) JONAS, Alvin, Jr.				DATE PREPARED 6 Nov 1962	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 11 1 62		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS Y TO Y Y TO CF CF TO Y CF TO CF		7. COST CENTER NO. CHARGE ABLE 33051 (X) 300		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DDP Task Force W F-01 Branch				10. LOCATION OF OFFICIAL STATION Washington, D.C.			
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 002		13. CAREER SERVICE DESIGNATION J			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 000		16. GRADE AND STEP 11 04		17. SALARY OR RATE \$1920	
18. REMARKS From: DDP/AF/Platoon, 1st, 7th A, F.O., 6th Trng CO, CF BRANCH: Sgt B... Philip C. ... AF/Platoon Off. 6/11/62							
19. SIGNATURE OF REQUESTING OFFICIAL Louis W. Armstrong				DATE SIGNED 6/11/62		20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER Paul R. ...	
21. SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
22. ACTION CODE 37		23. EMPLOY CODE 10		24. OFFICE CODING NUMERIC ALPHABETIC 61300 TFW		25. STATION CODE 22	
26. DATE OF BIRTH MO DA YR 1 5 12 71 19		27. DATE OF GRADE MO DA YR		28. DATE OF LIT MO DA YR		29. SECURITY REG. NO. 33	
30. RET. EXP. REF. NO. DA YR		31. SPECIAL REFERENCE 1 - CSC 2 - FICA 3 - NONE		32. SEPARATION DATA CODE TYPE		33. CORRECTION/CANCELLATION DATA MO. DA. YR.	
34. VET. PREFERENCE CODE 1 - NONE 2 - 5 PT 3 - 10 PT		35. SER. COMP. DATE MO DA YR		36. LONG. COMP. DATE MO DA YR		37. CAREER CATEGORY CODE CAR/RESV PROV/TEMP	
38. REQ. / HEALTH INSURANCE CODE 0 - NEITHER 1 - YES		39. SOCIAL SECURITY NO.		40. STATE TAX DATA CODE 1 - YES 2 - NO		41. STATE TAX DATA CODE 1 - YES 2 - NO	
42. PREVIOUS GOVERNMENT SERVICE DATA CODE 1 - NO PREVIOUS SERVICE 2 - NO BREAK IN SERVICE 3 - BREAK IN SERVICE (LESS THAN 3 YRS) 4 - BREAK IN SERVICE (MORE THAN 3 YRS)		43. LEAVE CAT. CODE		44. FOD DATA FOD DATA		45. O.P. APPROVAL Paul R. ...	
46. POSITION CONTROL CERTIFICATION 3. Kearney 11/19/62				47. DATE APPROVED			

SECRET
(When Filled In)

REQUEST FOR PERSONNEL ACTION										DATE PREPARED	
1. SERIAL NUMBER										4. EFFECTIVE DATE REQUESTED	
2. NAME (Last-First-Middle)										5. CATEGORY OF EMPLOYMENT	
3. NATURE OF PERSONNEL ACTION										6. LEGAL AUTHORITY (Completed by Office of Personnel)	
7. FUNDING										8. LOCATION OF OFFICIAL STATION	
9. ORGANIZATIONAL DESIGNATIONS										10. POSITION NUMBER	
11. POSITION TITLE										12. CAREER SERVICE DESIGNATION	
13. CLASSIFICATION SCHEDULE (GS, LP, etc.)										14. GRADE AND STEP	
15. OCCUPATIONAL SERIES										16. SALARY OR RATE	
17. REMARKS										18. SIGNATURE OF REQUESTING OFFICIAL	
19. SIGNATURE OF CAREER SERVICE APPROVING OFFICER										20. DATE SIGNED	
21. SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										22. DATE SIGNED	
23. ACTION CODE										24. EMPLOY CODE	
25. STATION CODE										26. DATE OF BIRTH	
27. DATE OF DEATH										28. DATE OF DEATH	
29. DATE OF DEATH										30. DATE OF DEATH	
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97. DATE OF DEATH										98. DATE OF DEATH	
99. DATE OF DEATH										100. DATE OF DEATH	

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
8 August 1961							
1. SERIAL NUMBER 027630		2. NAME (Last-First-Middle) HIDALGO, B. N., Jr.					
3. NATURE OF PERSONNEL ACTION REASSIGNMENT (And Transfer to Vouchered Funds)				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 08 20 61		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUND X		7. COST CENTER NO. CHARGEABLE 2635-5000-8021		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DDP/WH DDP Branch 4 FI-CI Sec.				10. LOCATION OF OFFICIAL STATION Washington, D.C.			
11. POSITION TITLE OPS OFFICER (D)				12. POSITION NUMBER 0681		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS (12)		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 11 (3)		17. SALARY OR RATE \$ 8,080	
18. REMARKS From: DDP/WH, Br. 4, #0626							
19. SIGNATURE OF REQUESTING OFFICIAL Herbert V. Jule, Jr. CH/WH/4/Pers.				20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER R. R. Brady			
SIGNATURE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
21. ACTION CODE 16		22. EMPLOYMENT CODE 10		23. ACTION CODE 60456		24. ACTION CODE 60456	
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541. ACTION CODE 16		542. ACTION CODE 10		543. ACTION CODE 60456</			

SECRET

REQUEST FOR PERSONNEL ACTION

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Vol. Pref.	5. Sex	6. CS - FOU
	HIDALGO, BALTES H., JR.	Mo. Da. Yr.	None	M	
7. SCD	8. CSC Rept.	9. CSC Or Other Legal Authority	10. Appt. Affidav.	11. FEGLI: 19	13. and 14. and 15.
Mo. Da. Yr.	Yes - 1 Code No - 2		Mo. Da. Yr.	Yes - 1 Code No - 2	Yes - 1 Code No - 2

2. PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code
DIS/OTR OPERATIONS SCHOOL COVERT TRAINING		WASH., D. C.	
16. Dept. - Field	17. Position Title	18. Position No.	19. Serv. 20. Occup. Series
Dept. - USfld - Frn -	INSTRUCTOR OPERATIONS	1014	GS 1711.50
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade
11 2	\$ 7270	D	Mo. Da. Yr. 03/17/58
25. PSI Due	26. Appropriation Number		
Mo. Da. Yr. 03/17/61	0175-2533		

ACTION

27. Nature Of Action	Code	28. Eff. Date	29. Type Of Employee	Code: 30. Separation Data
REASSIGNMENT	17	Mo. Da. Yr. 06/26/60	REGULAR	17

3A. PRESENT ASSIGNMENT

31. Organizational Designations	Code	32. Location Of Official Station	Station Code
DDP WH BRANCH 4	467	WASH., D. C.	
33. Dept. - Field	34. Position Title	35. Position No.	35. Serv. 37. Occup. Series
Dept. - USfld - Frn -	OPS OFFICER	BA-626	GS 0136.01
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade
11 2	\$ 7270	D	Mo. Da. Yr.
42. PSI Due	43. Appropriation Number		
Mo. Da. Yr.	0135 1000 1000		

SOURCE OF REQUEST

A. Requested By (Name And Title)	C. Request Approved By (Signature And Title)
1. P. C. ROWERS WH/PERSONNEL OFFICER	
B. For Additional Information Call (Name & Telephone Ex.)	
JOHN WASHINKO X8242	PERSONNEL OFFICER

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	W. K. R. 6-21-60		D. Placement		
B. Pos. Control	W. K. R. 6-23-60		E.		
C. Classification			F. Approved By	W. K. R. 6-23-60	

Remarks

2 copies to Security. 1 Loss Notice.

SECRET
(When Filled In)

DATE PREPARED Mo Da Yr 5 20 59			REQUEST FOR PERSONNEL ACTION						V. to V XX		V. to UV	
1. Serial No.			2. Name (Last-First-Middle) HIDALGO, Balmea N., Jr.						3. Date of Birth Mo Da Yr 5 27 19		4. V. to Pref. None-0 SP-1 10 P-2	
7. SCD Mo Da Yr No. 1 No. 2			8. CSC Reim. Yes-1 No-2						9. CSC Or Other Legal Authority		10. Appt. Affidav. Mo Da Yr Yes-1 No-2	
11. FEGLI Mo Da Yr Yes-1 No-2			12. LCD Mo Da Yr Yes-1 No-2						13. MIL SERV. CREDIT Mo Da Yr Yes-1 No-2		14. CDD	

PREVIOUS ASSIGNMENT

14. Organizational Designations DDP/WH Branch III Central America Section			Code			15. Location Of Official Station Washington, D. C.			Station Code		
16. Dept.-Field Dept. - Usfid. Frqn. - D			17. Position Title Area Ops Officer			18. Position No. 0486			19. Serv. GS		
20. Occup. Series 0136.01			21. Grade & Step 11 1			22. Salary Or Rate \$ 7,030			23. SD D		
24. Date Of Grade Mo Da Yr 03 17 58			25. PSI Due Mo Da Yr 09 10 59			26. Appropriation Number 8-3500-20					

ACTION

27. Nature Of Action Reassignment + Transfer to Confidential Funds			Code			28. Eff. Date Mo Da Yr 06 14 59			29. Type Of Employee Regular		
30. Separation Date C1											

PRESENT ASSIGNMENT

31. Organizational Designations DDS/OTR Operations School Covert Training			Code 1172			32. Location Of Official Station Washington, D. C.			Station Code 75C03		
33. Dept.-Field Dept. - D Usfid. Frqn. - 3			34. Position Title Instructor Operations			35. Position No. 1014			36. Serv. GS		
37. Occup. Series 1711.50			38. Grade & Step 11 1			39. Salary Or Rate \$ 7,030			40. SD D		
41. Date Of Grade Mo Da Yr			42. PSI Due Mo Da Yr			43. Appropriation Number 9-7500-30-018					

SOURCE OF REQUEST

A. Requested By (Name And Title) C/OS			C. Request Approved By (Signature And Title) Frank K. G. [Signature] Director of Training		
B. For Additional Information Call (Name & Telephone Ext.) x-3078					

CLEARANCES

Clearance		Signature		Date	
A. Career Board					
B. Pos. Control					
C. Classification					
D. Placement					
E.					
F. Approved By	C. Powell			11 JUN 1959	

Remarks

One copy forwarded to UNVOUCHERED Payroll. Two copies forwarded to Security.

Recorded by
CSPD

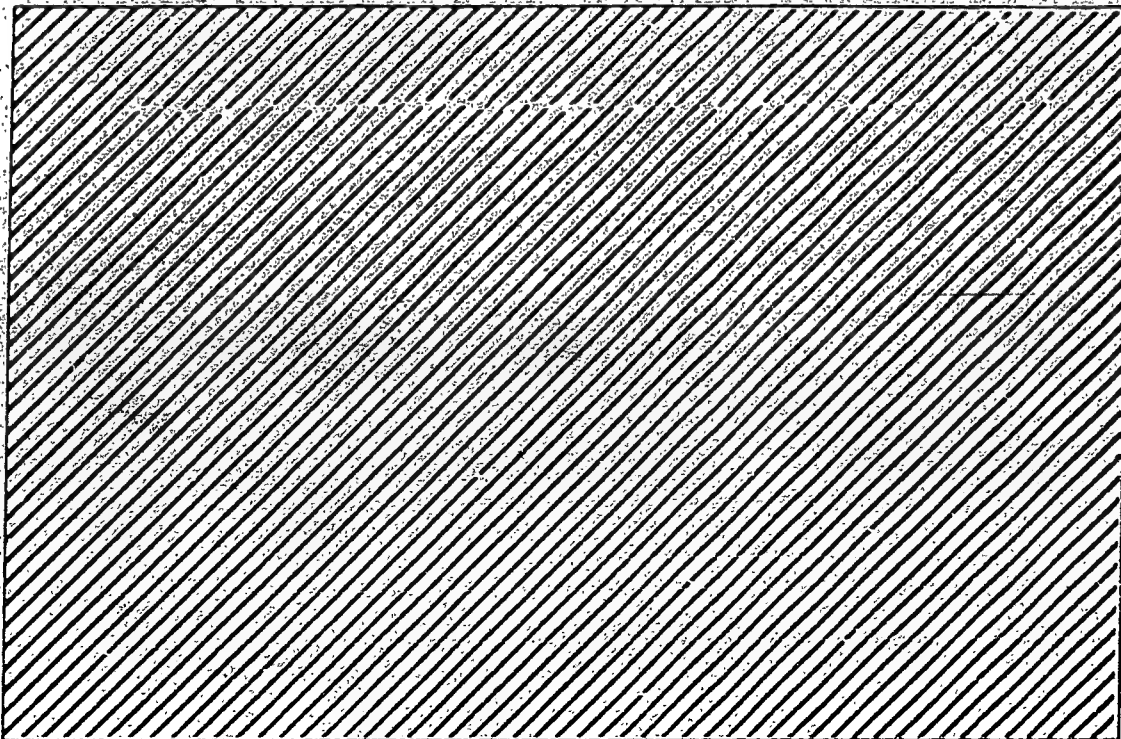
FORM 12-57 1152a (USE PREVIOUS EDITION)

SECRET

Security Approved For [Signature] Date 4/17/59

SECRET

(When Filled In)



NAME OF EMPLOYEE (LAST-FIRST-MIDDLE)	DATE OF BIRTH	CASE OR CLAIM NUMBER
HIDALGO, Ealme	unk	58-112

There is on file in the Casualty Affairs Branch, Benefits and Casualty Division, Office of Personnel, an Official Disability Claim File on the above named employee for an illness, injury, or death incurred on 1 Oct 57.

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE	SIGNATURE OF BCD REPRESENTATIVE
21 Sept 58	<i>[Signature]</i>

NOTICE OF OFFICIAL DISABILITY CLAIM FILE

SECRET

Classify According
To Content

REQUEST FOR PERSONNEL ACTION

1. Serial No. **12762** 2. Name (Last-First-Middle) **MR. BALMES N. HIDALGO, JR.** 3. Date Of Birth **5 27 19** 4. Var. Pict. **None-0** 5. Sex **M** 6. CS - EOD **2 17 58**

7. SCD **7 16 46** 8. CSC Reim. **Yes-1** 9. GSC Or Other Legal Authority **50 USC 4631** 10. Apmt. Affidav. **3 13 51** 11. FEGLI **Yes-1** 12. LCD **Yes-1** 13. Code **2**

PREVIOUS ASSIGNMENT

14. Organizational Designations **Code** 15. Location Of Official Station **Station Code**

16. Dept. Field **Code** 17. Position Title **Code** 18. Position No. **Code** 19. Serv. 20. Occup. Series

21. Grade & Step **22. Salary Or Rate** **23. SD** **24. Date Of Grade** **25. PSI Due** **26. Appropriation Number**

ACTION

27. Nature Of Action **Code** **28. Eff. Date** **29. Type Of Employee** **Code** **30. Separation Date**

Excepted Appointment **13** **3 17 58** **Regular** **01**

PRESENT ASSIGNMENT

31. Organizational Designations **Code** **32. Location Of Official Station** **Station Code**

DDP/WH **4613** **Washington, D.C.**

Branch III

Central America Section

33. Dept. Field **Code** **34. Position Title** **35. Position No.** **36. Serv.** **37. Occup. Series**

Area Ops Officer **# BA-486-11** **GS** **0136.01**

38. Grade & Step **39. Salary Or Rate** **40. SD** **41. Date Of Grade** **42. PSI Due** **43. Appropriation Number**

11-A **\$ 6390** **D** **3 14 58** **9 12 59** **8-3500-20**

SOURCE OF REQUEST

A. Requested By (Name And Title) **P.C. BOWERS JR. Personnel Officer** C. Request Approved By (Signature And Title)

B. For Additional Information Call (Name & Telephone Ext.) **JOHN WASHINKO X 8242**

CLEARANCES

Clearance **Signature** **Date** **Clearance** **Signature** **Date**

A. Career Board **3/12/58** D. Placement **3/14/58**

B. Pos. Control **3/11/58** E. **Robert W. Steag**

C. Classification **F. Approved By** **10 MAR 1958**

Remarks

Subject is presently engaged as a Contract Employee with the WH Division.
* For slotting purposes Only.

SECRET

STANDARD FORM 52
FORM 52-1
U.S. GOVERNMENT PRINTING OFFICE
1954 O - 352556
MILITARY PERSONNEL
MILITARY PERSONNEL

SECRET

UNVOUCHERED

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed.
If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Mrs., Miss, One given name, initial(s), and surname) Mr. Balmes N. HIDALGO, Jr.	2. DATE OF BIRTH 27 May 1919	3. REQUEST NO.	4. DATE OF REQUEST 8 July 55
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.): Excepted Appointment		6. EFFECTIVE DATE A. PROPOSED:	7. C.S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.):		9. APPROVED:	

FROM—	10. POSITION TITLE AND NUMBER	TO— I. O. (FI) BAF-277
	11. SERVICE, GRADE, AND SALARY	GS-0130.51-11, \$6390.00 P.a. X
	12. ORGANIZATIONAL DESIGNATIONS	DDP/WH
	13. HEADQUARTERS	Panama City, Panama
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	14. FIELD OR DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL

15. REMARKS (Use reverse if necessary)

Subject is presently a contract employee with Project HYPOTHESIS.

16. REQUESTED BY (Name and title) <i>[Signature]</i> C/WH	17. REQUEST APPROVED BY Signature: _____ Title: _____
18. FOR ADDITIONAL INFORMATION (Name and telephone extension) P. C. Bowers, X3692	

19. VETERAN'S PREFERENCE	20. POSITION CLASSIFICATION ACTION
NONE WWH OTHER S PT 15 POINT DISAB. OTHER	NEW VICE I.A. REAL

21. SEX M <input checked="" type="checkbox"/> W <input type="checkbox"/>	22. RACE FROM: 6-3525-56-051 TO:	23. SUBJECT TO C.S. RETIREMENT ACT (YES-NO) Yes	24. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	25. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE:
---	---	---	--	---

26. STANDARD FORM 50 REMARKS

[Handwritten notes and signatures]


27. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS. CONTROL	<i>[Signature]</i>	3 Aug 55	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.	220	220	
E.			

28. APPROVED BY *[Signature]* **7/28/55**

SECRET
(When Filled In)

1. PERSONAL SERIAL NO. 027630		BIOGRAPHIC PROFILE (PART I) CDD: 16 Jul 1976			
2. NAME (Last-First-Middle) HUTCHESON, B. N., Jr.		3. SEX M	4. DATE OF BIRTH 27 May 1910	5. LONGEVITY COMP. DATE 18 Feb 1958	
6. MARITAL STATUS Married	7. DEPENDENTS (Include Own- Employees) 2	8. YEARS OF BIRTH 1914-1892		9. US NATURALIZATION DATE(S) RA Puerto Rico NA	
10. CAREER STATUS Staff	11. MEMBERSHIP Mar 1961	12. OTHER STATUS	13. LAST MED. APT. DATE Jul 1967	14. QUAL. FOR Dept Only	15. LOCAL FOR TDY O/S
16. CURRENT RESERVE STATUS None	17. NON-SERVICE	18. GRADE	19. ACTIVE DUTY WITH CIA CAT. 1	20. RELEASE TO MIL. SEC. CAT. 2	21. DEFERRED CAT. 3
12a. ASSESSMENT DATE None		12b. PROFESSIONAL TEST DATE Feb 1958		12c. LANGUAGE ATTITUDE TEST DATE None	
13. EMPLOYMENT HISTORY SINCE 1942 (Personal Actions, Military Orders, and Principal Duties)					
1920-43 Military Service, US Army, Cpl - Infantry 1944-45 Jersey City Quartermaster Depot, Jersey City, NJ - Inspector 1945-47 Francis H. Loggitt Co (Food Wholesaler), NYC - Correspondence Clerk 1948-49 Dept of Justice, FBI, NYC - Contract Agent on a Penetration Project 1948-50 Colonial Trust Co (Bank), NYC - Collections Clerk 1950-51 American Trust Co (Bank), NYC - Collections Clerk 1951-52 Dept of Defense, New York QM Procurement Agency, NYC - Inspector					
14. NON-CIA EDUCATION High School Graduate					
1945-46 New York University - Foreign Trade, Business Law					
15. FOREIGN LANGUAGE ABILITIES (Language, Proficiency, Date Tested)					
Portuguese - R: Inform; W, P, S, U None (Oct 1959); T None - May 1958 Spanish - R High; W Inform; P, S, U Native (Nov 1959); Translate, Interpret - May 1958					
16. AGENCY SPONSORED TRAINING					
1958 Comm Party Org & Ops 1958 Intel Orient 1958 CI Famil 1959 Picks & Locks 1958 Info Rptng, Rpts & Rqmts 1959 Audio Surveil Mgmt 1958 Operations 1966 Undetermined Entry (Act)					
17. CIA EMPLOYMENT HISTORY SINCE 1942 (Personal Actions, Military Orders, and Principal Duties)					
EFFECTIVE DATE	POSITION TITLE & OCCUPATIONAL CODE	GRADE	NO	ORGANIZATION & CHRG. TITLE (If any)	LOCATION
Mar 1958	Feb 1952 - Mar 1958, Contract Employee for DDP/WH/Project HYPOTHESIS				Panama
	Area Ops Off 0136.01	11	D	DDP/WH-III/Control America	Hq
	Jan - Feb 1959, TDY Mexico and Guatemala				
Jun 1959	Instructor (Ops) 17/11.50	11	D	OTR/Ops School/Control Mex	Hq
Jun 1960	Ops Off 0136.01	11	D	DDP/WH-4	"
Aug 1961	" 0136.01	11	D	DDP/WH-4/PI-CI Sec	"
Jan 1962	" 0136.01	11	D	DDP/WH/Plans & Ops Sec/Sec A	"
Apr 1963	" 0136.01	11	D	DDP/SAS/US Fid/Forward, Ops Sta	JMWAVE
Dec 1963	" 0136.01	12	D	" " " " " "	"
Apr 1964	" 0136.01	12	D	DDP/SAS/CS/CS Dev Corp	Hq
Nov 1964	" 0136.01	12	D	DDP/SAS/CI Staff/Ops	"
May 1965	" 0136.01	12	D	DDP/WH/CS/CS and Ops Br	"
Dec 1965	" 0136.01	12	D	DDP/WH-2/Panama	"
18. DATE REVIEWED 22 Jun 1966		19. PROFILE REVIEWED BY huc/abc		20. STENOGRAPHIC REVIEWED & VERIFIED BY EMPLOYEE huc/abc 1966	

SECRET
(When Filled In)

PERS. SERIAL NO. 022630		BIOGRAPHIC PROFILE (PART 2)	
NAME (Last-First-Middle) HARRIS, R. N., Jr.		DATE OF BIRTH 27 May 1919	
23. SUMMARY OF EVALUATIVE REPORTS FOR THE PAST TWO YEARS			
			
24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE			
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL			
26. ADDITIONAL INFORMATION Appreciation 1968 from TSD/AP/CAS for the postal intercept exemplars which are invaluable to that office.			
27. DATE REVIEWED 23 Jun 1969		28. PROFILE REVIEWED BY HNS/ots	

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				027630			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
Hidalgo Balmes N.			05/27/19	M	GS-12	D	
6. OFFICIAL POSITION TITLE			7. OFF/CIV. BR. OF ASSIGNMENT		8. CURRENT STATION		
Ops Officer			DDP/MH/2		HQS		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT				
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR				
CAREER-PROVISIONAL (See Instructions - Section C)			XX ANNUAL		REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):				
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - To)				
31 January 1969			1 January 1968 - 31 December 1968				
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Panama Desk Case Officer for Panama City Station FI operations. Prepares cables and dispatches to Panama City and other Stations and internal Headquarters correspondence.							RATING LETTER P
SPECIFIC DUTY NO. 2 Conducts required coordination with other offices within the agency.							RATING LETTER P
SPECIFIC DUTY NO. 3 Supervises and/or maintains files and regulates indexing relating to his cases.							RATING LETTER P
SPECIFIC DUTY NO. 4							RATING LETTER
SPECIFIC DUTY NO. 5							RATING LETTER
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER P

SECRET
(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Power of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Mr. Hidalgo is a man of unusual background even in our unusual organization. This background undoubtedly affords him qualifications for our work, but nevertheless, on the professional level he suffers from disadvantages as well--overcoming some but not others. He is not well-educated in a formal sense, and in our world of words is not adequately equipped to prepare finished written correspondence. He has difficulty in organizing his work systematically, thus at times, giving an impression that the preparation has not been thorough--which might not really have been true.

On the other hand, Mr. Hidalgo has the advantage of native fluency in Spanish and an obvious understanding of the Latin thinking process and culture. He is broadly experienced in operations, not only as a case officer but as an actual agent himself, having served four years as a Bureau penetration of the CPUSA. He is operationally imaginative and unquestionably possesses the ingenuity and courage to translate ideas into action. In this respect, however, his efforts must be channeled and selectivity exercised. On the Panama Desk this officer provides the valuable service of operational history and continuity; he served six years in the Station and has been on the desk for three.

Continued

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 9 Jan 1969	SIGNATURE OF EMPLOYEE <i>[Signature]</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS GIVEN UNDER MY SUPERVISION 4	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION <i>[Initials]</i>	
DATE 9 January 1969	OFFICIAL TITLE OF SUPERVISOR C/WH/2/P	SIGNATURE <i>[Signature]</i>
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL Mr. Hidalgo is an experienced and well qualified operations officer, and it is indeed unfortunate that there are medical problems which do not allow him to be assigned overseas. Since Mr. Hidalgo cannot be assigned overseas, I too endorse his desire to be assigned to OTR or to another assignment of his choice.		
DATE 9 JAN 1969	OFFICIAL TITLE OF REVIEWING OFFICIAL C/WH/2	TYPED OR PRINTED NAME AND SIGNATURE <i>[Signature]</i> Edwin M. Terrell

SECRET

SECRET

SECTION C Continued

Hidalgo, Balmes N.

Mr. Hidalgo is a gregarious uncomplicated person, generally pleasant, and generous in his instincts--but not entirely without his quixotic side--and one whose natural Latin emotionality has been intensified by a life of experiences outside the norm, e.g. years as a CP penetration, air crashes, war wounds, etc.

This officer is aware that his intellectual background and medical debilities are obstructions to his advance. Understandably, he has developed outside interests, apparently as compensation. Expectedly, his attitudes at times so reflect.

In sum, Mr. Hidalgo serves a satisfactory function on the Panama Desk and no doubt could continue to perform so indefinitely, but in view of his limitations in a desk-bound situation and the medical restrictions, both of which will continue to inhibit his advance in his present component, this supervisor endorses Mr. Hidalgo's desire to be considered for transfer to another component, namely OTR (specifically covert training), where his attributes would likely come more directly into play. He has the operational experience, competency in a foreign language, an outgoing personality, and experience in lecturing and teaching.* Finally, regardless of the shortcomings reflected in this evaluation, the grading officer finds much to admire in Mr. Hidalgo personally.

*Should a suitable opening in that field be unavailable, it is felt there would be merit also in considering Mr. Hidalgo's other stated interests, i.e., the technical interrogation section of the Office of Security or OO Contacts Division.

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				027630	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle) HIDALGO, Balmes N., Jr.			2. DATE OF BIRTH 27 May 1919	3. SEX M	4. GRADE GS-12
5. OFFICIAL POSITION TITLE Ops Officer			6. OFF/DIV/BR OF ASSIGNMENT DDP/WH/2		
7. CHECK (X) TYPE OF APPOINTMENT			8. CURRENT STATION Headquarters		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C)			9. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL SPECIAL (Specify):		
10. REASSIGNMENT SUPERVISOR			10. REASSIGNMENT EMPLOYEE		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) 1 JAN 1967 to 31 DEC 1967		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment, or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					RATING LETTER
SPECIFIC DUTY NO. 1 Responsible for all FI/CI Projects for the Desk					S
SPECIFIC DUTY NO. 2 Initiates, prepares and coordinates all operational communications to the field on FI/CI matters					P
SPECIFIC DUTY NO. 3 Prepares project renewals, studies and papers on FI/CI matters					P
SPECIFIC DUTY NO. 4 Translates Spanish language material for the Branch					O
SPECIFIC DUTY NO. 5 Coordinates FI/CI matters for the Desk with other Hqs components					S
SPECIFIC DUTY NO. 6 Occasionally handles visiting indigenous assets					S
OVERALL PERFORMANCE IN CURRENT POSITION					RATING LETTER
31 MAR 1967 Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					S

SECRET

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p>			
<p>Comment by Mr. Tsikerdanos, previous supervisor: 15181 '67</p> <p>Mr. Hidalgo is a very capable case officer who is more suited to a field position. He is adept at handling indigenous personnel and has a keen operational mind. He is good at grasping operational leads but is not a capable writer. He has trouble expressing himself on paper. His Spanish language capability is a decided asset to the Branch. A longstanding illness has limited his effectiveness at the Desk. He is cost conscious and has no supervisory responsibilities.</p> <p>Comments by Present Supervisor:</p> <p>I concur in the above estimate of Mr. Hidalgo's operational capabilities. During the months (Oct 1966 - March 1967) I have worked with Mr. Hidalgo I have not found his health to be a factor in his performance of his duties.</p> <p style="text-align: right;">Ken Knaus</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
10 March 67	<i>[Signature]</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
11			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
9 MAR 1967	Formerly C/NH/2/P	<i>[Signature]</i>	
9 MAR 1967	Present C/NH/2/P	Ken Knaus	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>Mr. Hidalgo's health caused him to be absent from his duties several times during the first part of 1966 but these absences were for a limited period. From my observation, his health has not presented a serious problem to the performance of his duties.</p> <p>Several times during the absence of Mr. Tsikerdanos in the year 1966 Mr. Hidalgo was the acting desk officer. His performance was most satisfactory, and his supervision of the other desk employees, albeit for a limited period, was fully satisfactory.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
9 MAR 1967	C/NH/2	<i>[Signature]</i> Edwin M. Terrell	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				027630			
SECTION A GENERAL							
1. NAME (Last) (First) (Middle) HITAURO, Palmes A., Jr.			2. DATE OF BIRTH 27 May 1919		3. SEX M		4. GRADE GS-12
5. OFFICIAL POSITION TITLE C's Officer			7. OFF/DIV/BR OF ASSIGNMENT DD//T/C		6. CURRENT STATION Headquarters		
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):				<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to) 16 Jan - 30 October 1955			
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Headquarters desk officer responsible for the support of Miami Station CI/CE activities and operations.							RATING LETTER P
SPECIFIC DUTY NO. 2 Advisor to various components of the WH and WE Divisions on Cuban operations with specific reference to the Cuban Security Intelligence Service, organization, modus operandi and							RATING LETTER S
SPECIFIC DUTY NO. 3 Briefing representatives of personnel foreign liaison services and selected agents visiting in Washington on the Cuban Security and Intelligence Services and his own unique experience in the Communist Party.							RATING LETTER S
SPECIFIC DUTY NO. 4 Translator/interpreter: Served as consultant to WH Division on Cuban Spanish.							RATING LETTER S
SPECIFIC DUTY NO. 5							RATING LETTER
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER S

SECRET

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B by provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p>			
<p>Mr. Hidalgo is an able intelligence officer, ^{Office of} developed to his profession and selfless in his desire to be of service to the Government. Although he has suffered ill health in recent years, he was insistent that he be among the first to be sent to the Dominican Republic when the crisis occurred.</p> <p>An intense person, Mr. Hidalgo is industrious, works well under pressure and sets high standards for his performance. Because he is intent on getting things done, he is occasionally hasty in judgment and in written presentation of the results of his research and conclusions. He is perceptive, quickly accepts suggestions and offers counter-proposals with cogent argument. Mr. Hidalgo was not in a supervisory capacity. He was cost conscious; always endeavoring to be conservative where possible.</p> <p>He is an effective and cooperative member of an office, ready to assume responsibility and to help his colleagues. Thanks to his unique experience on the Cuban target, he has wide knowledge of the Cuban problem and is, in fact, an expert on the Cuban Security and Intelligence Services.</p>			
SECTION D CERTIFICATION AND COMMENTS			
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
9 December 1965	<i>[Signature]</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
8 months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/WH/C/MO/FI-CI	<i>[Signature]</i> Susan L. Darling	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>I concur with the supervisor's assessment of Mr. Hidalgo with an exception to the statement that Subject works well under pressure. He is indeed an intense person and, under great pressure, his involvement affects his performance; and even more important, it has a very bad effect on his health. With this consideration noted, the undersigned thinks very highly of Mr. Hidalgo and would be pleased to be associated with him again.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/WH/C/MO	Walter T. Cini <i>[Signature]</i>	

SECRET

SECRET
(When Filled In)

1. PERSONAL SERIAL NO. 27630		BIOGRAPHIC PROFILE (PART I) SCD: 16 Jul 1946					
2. NAME (Last, First, Middle) RUDOLPH CARLOS RIVERO, JR.		3. SEX M		4. DATE OF BIRTH May 1919		5. LONGEVITY COMP. DATE 17 Mar 1958	
6. MARITAL STATUS Married		7. DEPENDENTS (Listed - played) 3		8. YEAR(S) OF BIRTH 1927 1945 1950		9. US NATURALIZATION DATE(S) NA Puerto Rico NA	
10. CARRIED STAFF STATUS STATUS		MEMBERSHIP X		OTHER STATUS Pending		11. LAST MED. RPT. EVAL. FOR Sop 1962 Dept Only TDY O/S	
12. CURRENT RESERVE STATUS STATUS		NON-SERVICE X		GRADE		13. ACTIVE DUTY WITH CIA CAT. - 1	
14. ASSESSMENT DATE None		15. PROFESSIONAL TEST DATE Feb 1958		16. LANGUAGE ATTITUDE TEST DATE None		17. TO BE DEFERRED CAT. - 3	
18. EMPLOYMENT HISTORY SINCE 15 SEPT 1947 (Personal Actions, Military Orders, and Principal Details)							
1940-43 Military Service, US Army, Cpl - Infantry 1944-45 Jersey City Quartermaster Depot, Jersey City, NJ - Inspector 1945-47 Francis H. Lussit Co (Food Wholesaler), NYC - Correspondence Clerk 1946-49 Dept of Justice, FBI, NYC - Contract Agent on a Penetration Project 1948-50 Colonial Trust Co (Bank), NYC - Collections Clerk 1950-51 American Trust Co (Bank), NYC - Collections Clerk 1951 Dept of Defense, New York QM Procurement Agency, NYC - Inspector							
19. NON-CIA EDUCATION							
1945-46 New York University - Foreign Trade, Business Law							
20. FOREIGN LANGUAGE ABILITIES (Language, Proficiency, Date Tested)		Portuguese - R Intern; W, P, S, U Zero (Oct 1959); T None - May 1958 Spanish - R High; W Intern; P, S, U Native (Nov 1959); Translate, Interpret - May 1958					
21. AGENCY SPONSORED TRAINING							
1958 Comm Party Org & Ops 1958 CI Famil 1958 Info Rptng, Rpts & Rqmts 1958 Operations 1958 Intel Orient 1959 Picks & Locks 1959 Audio Surveill Mgmt							
22. CIA EMPLOYMENT HISTORY SINCE 15 SEPT 1947 (Personal Actions, Military Orders, and Principal Details)							
EFFECTIVE DATE		POSITION TITLE & OCCUPATIONAL CODE		GRADE	SD	ORGANIZATION & DUTY TITLE (If any)	LOCATION
Mar 1958	Feb 1952 - Mar 1958, Contract Employee for DDP/WH/Project HYPOTHESIS Panama Area Ops Off	0136.01	11	D	DDP/WH-III/Central America	Hq	
Jun 1959	Jan - Feb 1959, TDY Mexico and Guatemala	1711.50	11	D	OTR/Ops School/Covert Trng	Hq	
Jun 1960	Ops Off	0136.01	11	D	DDP/WH-4	"	
Aug 1961	"	0136.01	11	D	DDP/WH-1/PI-CI Sec	"	
Jan 1962	"	0136.01	11	D	DDP/WH/Plans & Ops Stf/Sec 4	"	
Apr 1963	"	0136.01	11	D	DDP/SAS/US Fld/forward Ops Sta	JMWAVE	
23. DATE REVIEWED 24 Oct 1963		24. PROFILE REVIEWED BY OP/POD/OJW/hms/rwh		25. ITEMS 1-19 REVIEWED & VERIFIED BY EMPLOYEE 9 Feb 1960			

SECRET
(When Filled In)

PERS. SERIAL NO. 27630	BIOGRAPHIC PROFILE (PART 2)
NAME (Last-First-Middle) HIDALGO, Balme Nieves, Jr.	DATE OF BIRTH May 1919
<div data-bbox="569 518 917 1022" data-label="Image"> </div>	
24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE	
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL	
26. ADDITIONAL INFORMATION	
27. DATE REVIEWED	28. PROFILE REVIEWED BY OP/POO/SAB

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
SECTION A				GENERAL			
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SS	
HIDALGO, BALMES			27 May 1919	M	GS-11	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/DR OF ASSIGNMENT 8. CURRENT STATION				
Ops Officer			DDP WH P&O SEC A				
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT				
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> SPECIAL (Specify):			<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify):				
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)				
30 October 1962			17 Jan 62 - 30 Sep 62				
SECTION B PERFORMANCE EVALUATION							
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							RATING LETTER
SPECIFIC DUTY NO. 1 Responsible for initiation and development of WH Division durable assets program.							P
SPECIFIC DUTY NO. 2 Collate and maintain files on espionage laws of LA countries.							P
SPECIFIC DUTY NO. 3 Served as interpreter and translator for Division LA contacts.							P
SPECIFIC DUTY NO. 4 Coordinated with Branch 1 of WHD on FI and CI matters.							P
SPECIFIC DUTY NO. 5 Gives lectures as guest instructor to students attending School of International Communism.							S
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER P

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. <u>Manner of performance of managerial or supervisory duties must be described, if applicable.</u></p> <p>Mr. Hidalgo joined WH/PO/A in November 1961 and took up those responsibilities listed above. However, Mr. Hidalgo's performance of duties was interrupted on two occasions by serious illness, 9-27 March and 15 April-31 May 1962. He was twice hospitalized. From 25 June-9 August 1962, Mr. Hidalgo was on TDY for WH/3 as escort officer for Latin American trainees. Although beset by health and other personal problems, Mr. Hidalgo seized upon each new assignment with his customary energy. He proved particularly adept in working as interpreter and escort officer for Latin American trainees, and demonstrated high interest and proven competence in counterintelligence work. His excellent memory and quick perception were distinct assets in these undertakings.</p> <p>It is recommended, however, that Mr. Hidalgo's next assignment not carry responsibility for submission of finished papers or staff studies, but be one entailing duties commensurate with his ability to work effectively with indigenous personnel and to pursue CI leads through records investigation.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
18 Sept 62	<i>Delmo S. Hidalgo</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
18 September 1962	C/WH/PO/A	<i>Clark W. Simmons</i> CLARK W. SIMMONS	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
I have had insufficient personal contact with Subject to make any meaningful comments.			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPE	RE
13 September 1962	C/WH/CPS		

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER				
SECTION A GENERAL				027630				
1. NAME (Last) HIDALGO		(First) Baltes		(Middle) N., Jr.				
2. DATE OF BIRTH 27 May 1919		3. SEX Male		4. GRADE GS-11				
5. SERVICE DESIGNATION D		6. OFFICIAL POSITION TITLE Operations Officer		7. OFF. DIV./BR. OF ASSIGNMENT DDP/WH, Rm. 4, D.C.				
8. CAREER STAFF STATUS			9. TYPE OF REPORT					
<input type="checkbox"/> NOT ELIGIBLE <input type="checkbox"/> MEMBER <input type="checkbox"/> DEFERRED <input type="checkbox"/> INITIAL <input type="checkbox"/> PENDING <input type="checkbox"/> DECLINED <input type="checkbox"/> DENIED <input checked="" type="checkbox"/> ANNUAL			<input type="checkbox"/> REASSIGNMENT/SUPERVISOR <input type="checkbox"/> REASSIGNMENT/EMPLOYEE					
10. DATE REPORT DUE IN O.P. 31 October 1961		11. REPORTING PERIOD Oct60 To 30 Sep61		12. SPECIAL (Specify)				
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES								
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).								
1 - Unsatisfactory 2 - Barely adequate 3 - Acceptable 4 - Competent 5 - Excellent 6 - Superior 7 - Outstanding								
SPECIFIC DUTY NO. 1 Hqs. C.O. for 3 major CI/PI Projects-at one time comprising 301 Agents. Originates operational traffic, Support traffic and maintains records and files.		RATING NO. 5		SPECIFIC DUTY NO. 4 Responsible for spotting, interviewing and recruiting of Cuban students in the U. S. for return to Cuba for operational purposes.				
SPECIFIC DUTY NO. 2 Hqs. C.O. for 8 unilateral independent Agents, including originating operational and Support traffic, and maintaining proper records and files.		RATING NO. 4		SPECIFIC DUTY NO. 5				
SPECIFIC DUTY NO. 3 Interviewing, briefing and debriefing Spanish only speaking Agents and contacts for all operational Sections of the Branch.		RATING NO. 6		SPECIFIC DUTY NO. 6				
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION								
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance:								
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.					RATING NO. <div style="border: 1px solid black; padding: 5px; width: 30px; margin: 0 auto;">5</div>			
SECTION D DESCRIPTION OF THE EMPLOYEE								
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee:								
1 - Least possible degree 2 - Limited degree 3 - Normal degree 4 - Above average degree 5 - Outstanding degree								
CHARACTERISTICS		NOT APPLICABLE	NOT OBSERVED	RATING				
				1	2	3	4	5
GETS THINGS DONE							X	
RESOURCEFUL							X	
ACCEPTS RESPONSIBILITIES							X	
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES							X	
DOES HIS JOB WITHOUT STRONG SUPPORT							X	
FACILITATES SMOOTH OPERATION OF HIS OFFICE							X	
WRITES EFFECTIVELY						X		
SECURITY CONSCIOUS						X		
THINKS CLEARLY							X	
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS							X	
OTHER (Specify):								
SEE SECTION "E" ON REVERSE SIDE								

SECRET

(When Filled In)

SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE		
<p>Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.</p> <p>Mr. Hidalgo has done a fine job during the reporting period, while assigned to the CI Section of the Branch when it was in its most active period of buildup and operations. The manner in which he accepted any assignment is unusual and he was often working under pressure. During the period, he was on several temporary duty trips in connection with operational activities, which he completed very well.</p> <p>He has a talent for getting along with and understanding Latin Americans, and with his fluent Spanish language capability, he has performed in a commendable manner. While Mr. Hidalgo has never shunned responsibility, his assignment did entail the delegation of extensive responsibility. It is the feeling of the Rating Officer that he should be given the opportunity for greater responsibility, and training, which will qualify him for a supervisory role. After that, he should be qualified in all respects for promotion to GS-12.</p>		
SECTION F CERTIFICATION AND COMMENTS		
1. BY EMPLOYEE		
I certify that I have seen Sections A, B, C, D and E of this Report.		
DATE	SIGNATURE OF EMPLOYEE	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
11	Subject hospitalized.	
IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.		
EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS	REPORT MADE WITHIN LAST 90 DAYS	
OTHER (Specify):		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
20 March 62	D/Chief, WH/4/CI	Robert W. Andrews
3. BY REVIEWING OFFICIAL		
<input checked="" type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION. <input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION. <input type="checkbox"/> I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION. <input type="checkbox"/> I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.		
COMMENTS OF REVIEWING OFFICIAL		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
21 March 1962	C/WH/4/CI	CLARK W. SIMMONS

SECRET

SECRET

NOTIFICATION OF CANCELLATION OF OFFICIAL COVER BACKSTOP		DA. 14 September 1966
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, PERSONNEL OPERATIONS DIVISION	SUBJECT Hidalgo, Bimes N., Jr.
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For Action)	
	<input checked="" type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION WH	
ATTN: Mr. Hannah		
REF: Form 1322 dated 9 September 1966		FILE NO. 9927
OFFICIAL COVER DISCONTINUED		ID CARD NO. 1140 (Returned)
		EMPLOYEE NO.

☒ Unblock Records:
(OP Memo 20-800-77)

Effective EOD

☒ Submit Form 642 To Change Limitation Category.
(HB 20-800-2 to be redesignated HHB 20-7)

☒ Return All Official Documentation To CCS.


1-PSD:OS

SECRET

SECRET

NOTIFICATION OF ESTABLISHMENT OF <input type="checkbox"/> COVER BACKSTOP		DATE 9 April 1964
TO: <input checked="" type="checkbox"/> CHIEF, RECORDS AND SERVICES DIVISION	ESTABLISHED FOR	
(Check) <input type="checkbox"/> CHIEF, OPERATING COMPONENT, SAS	HIDALGO, Balmes N., Jr.	
ATTN: <input type="checkbox"/>	FILE NO. K-7412	
REF: Request for Cover, 9 April 1964	ID CARD NO.	
MILITARY COVER BACKSTOP ESTABLISHED	NA	
<input type="checkbox"/> BLOCK RECORDS: (OPMEMO 20-800-11) <input checked="" type="checkbox"/> a. TEMPORARILY FOR _____ DAYS, EFFECTIVE _____ <input checked="" type="checkbox"/> b. CONTINUING, EFFECTIVE <u>ROD</u>		
<input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY TO 3. (RB 20-800-2)		
<input type="checkbox"/> ASCERTAIN THAT ARMY W-2 BEING ISSUED. (RB 20-661-1)		
<input type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (R 240-250)		
<input type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (R 240-250)		
<input type="checkbox"/> REMARKS:		

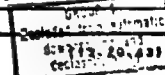
THIS MEMO MUST REMAIN
TOP OF FILE

☐ COPY TO CPO/OP

James H. Franklin
CD/sll CHIEF, MILITARY COVER, CCG

DISTRIBUTION: 1-OSD/OS, 1-PSD/OS, 1-ADPD/COMPT

SECRET



SECRET

NOTIFICATION OF ESTABLISHMENT OF <u> </u> COVER BACKSTOP		DATE 23 April 1963
TO: <input checked="" type="checkbox"/> (CMAA)	CHIEF, RECORDS AND SERVICES DIVISION	ESTABLISHED FOR
ATTN: <u> </u>	CHIEF, OPERATING COMPONENT SAS	HIDALGO, Balmea N., Jr.
REF: Verbal request for cover	MILITARY COVER BACKSTOP ESTABLISHED	FILE NO. K-7412
		ID CARD NO.
<input checked="" type="checkbox"/> BLOCK RECORDS: (OPENS 20-800-11)		
a. TEMPORARILY FOR <u> </u> DAYS, EFFECTIVE <u> </u> .		
b. CONTINUING, EFFECTIVE <u> </u> EOD <u> </u> .		
<input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY TO 3. (HB 20-800-3)		
<input type="checkbox"/> ASCERTAIN THAT ARMY W-2 BEING ISSUED. (HB 20-661-1)		
<input type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (R 240-230)		
<input type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (R 240-230)		
<input type="checkbox"/> REMARKS:		

THIS MESSAGE MUST REMAIN
ON TOP OF FILE

☐ COPY TO CPD/OP

James H. Franklin
CD/pp CHIEF, MILITARY COVER, CCG

DISTRIBUTION: 1-OSD/OS, 1-PSD/OS, 1-ADPD/COMPT

SECRET

NOTIFICATION OF CANCELLATION OF COVER BACKSTOP		DATE 9 March 1962
TO: <input checked="" type="checkbox"/> CHIEF, RECORDS AND SERVICE DIVISION (Check) <input type="checkbox"/> CHIEF, OPERATING COMPONENT - WH D1v	SUBJECT HIDALGO, BAUTIS N. JR.	
ATTN: WH/SS 	FILE NO. K-7412	
REF: Your request of 1322 dated: undated MILITARY COVER DISCONTINUED	ID CARD NO. 832	
<div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
<input checked="" type="checkbox"/> UNLOCK RECORDS: (OP memo 20-800-11)		
EFFECTIVE <u>27 October 1960</u>		
<input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HD 20-800-2)		
<input type="checkbox"/> RETURN ALL MILITARY DOCUMENTATION.		
<input type="checkbox"/> REMARKS:		
<div style="text-align: center; font-size: 2em; font-weight: bold; margin-top: 50px;"> THIS AREA MUST REMAIN ON TOP OF FILE </div>		
<div style="border: 1px solid black; height: 40px; width: 100%;"></div>		
<input type="checkbox"/> COPY TO CPD/OP		
39165 DISTRIBUTION 1-SS/		

FORM 12-61 1551a

SECRET

(13-20-43)

SECRET

7 March 1968

MEMORANDUM FOR: Chief, Records and Services Division
Office of Personnel

THROUGH : Personnel Security Division
Office of Security

SUBJECT : Ealme N. HIDALGO, Jr., Contract Employee

1. Cover arrangements have been completed for the above named subject.

2. Effective immediately, it is requested that your records be properly (blocked) (~~XXXXXXX~~) to (deny) (~~XXXXXXXXXX~~) subject's current Agency employment by an external inquirer. Subject is to be converted to Staff Employee status within the next few days.

3. This memorandum confirms an oral request of 7 March 1968.

cc: PSD/CS

EN

THIS SECRET

1
23

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-221 AND EXECUTIVE ORDER 11524 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCT. 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT:

NAME: HIDALGO, B. N., JR. SERIAL: 027630 ORG: 51 350 GRADE: Y 12 5 NEW SALARY: \$15,004

1. LAST NAME: HIDALGO, B. N. JR.		INITIAL(S):		2. APPOINTMENT DATA Entered on duty: F, T, P, T		3. TOTAL SERVICE FOR LEAVE (as of: of separation)		
4. DATE AND NATURE OF SEPARATION: RETIREMENT-DISABILITY-UNDER CIA RET AND DIS SYSTEM EFF 2/28/70				Subject to Sec 203(d) 1937 Leave Act Yes <input type="checkbox"/> No <input type="checkbox"/> Ceased to be subject to Sec 203(d) on Annual Leave Bal		Years: Months: Days: <input type="checkbox"/> More than 15 years		
SUMMARY OF ANNUAL AND SICK LEAVE (HOURS)				SUMMARY OF HOME LEAVE (DAYS)				REMARKS SCD 7/16/46
5. Balance from prior leave year ended 1/10/70				14. Date arrival abroad for HL purposes				
6. Current leave year accrual through 2/21/70				15. Current balance as of: 19				
7. Total				16. 12 month accrual rate				
8. Reduction in credits, if any (current year)				17. Dates leave used, prior 24 months				
9. Total leave taken				18. Monthly accrual date				
10. Balance				19. Calendar days credit for next accrual date				
11. Total hours paid in lump sum 66 hrs				20. Date basic service period completed				
12. Salary rate(s) \$15,173.00				21. Dates during current calendar yr to				
13. Lump sum leave dates from 0830 3/02/70 to 3/11/70 1030 (Hours)				22. Dates during preceding calendar yr to				
20. Certified correct by: [Signature] for Chief Payroll				23. During leave year in which separated				MILITARY LEAVE 24. During step increase making period which began on 12/15/68 25. During 12-month HL accrual period (dates)
(Signature)				(Date)				
(Telephone)				(Telephone)				

Standard Form 1150
November 1965
1150-100

RECORD OF LEAVE DATA TRANSFERRED

U.S. CIVIL SERVICE COMMISSION
FPM SUPPLEMENTS 230-31 AND 990-2

3-71-70

70-1271

70-1556

3-1 MAR 1970

Mr. Balmes N. Hidalgo, Jr.
401 Silver Rock Road
Rockville, Maryland 20851

Dear Mr. Hidalgo:

As you bring to a close more than twenty years of service to your country, I want to join your friends and co-workers in wishing you well and hoping that you find the years ahead filled with enjoyment and satisfaction.

It takes the conscientious efforts of many people to do the important work of this Agency. You leave with the knowledge that you have personally contributed to our success in carrying out our mission. Your faithful and loyal support has measured up to the high ideals and traditions of the Federal service.

May I express to you my appreciation and extend my best wishes for the years ahead.

Sincerely,

/s/ Richard Holms

Richard Holms
Director

Distribution:

0 - Addressee

1 - DDCI

1 - ER

1 - C/EAB/OS

1 - D/Pers

1 - OPF

1 - ROB Soft File * Concur:

1 - ROB Reader

Originator:

Director of Personnel

C/EAB/OS

OP/RAD/ROB/[]jat/3257 (5 March 1970)

8 SEP 1970

Mr. Baltes N. Hidalgo, Jr.
403 Silver Rock Road
Rockville, Maryland 20851

Dear Mr. Hidalgo:

It is the practice of the Organization to follow up with former employees six months after their retirement. We hope by such inquiry to obtain information on what our retirees are doing and where they are located, invite suggestions for improving the retirement program and to learn if the Organization might be of some assistance on any post-retirement matters.

We should like very much to hear from you on the above points and on any other topics you think would be useful to us.

For your convenience in replying, we have enclosed a sheet somewhat akin to a form on which we have listed those standard items of information we'd like to have on every retiree. The remainder of the sheet, including the reverse side, is for your comments and suggestions. We shall be most appreciative of your fullest response to this inquiry.

Thank you very much for your cooperation.

Sincerely yours,

Carroll A. Duchay
Personnel Officer

Enclosures:

Questionnaire
Return Envelope

Distributions:

Original - Addressee
1 - OPF
1 - RAD Subject's File

OP/RAD/EFAB/ [] :dag (31 Aug 70)

SECRET
(When Filled In)

DSJ: 4 MAR 70

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
027630		HIDALGO, R N JR									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
RETIREMENT-DISABILITY-UNDER CIA RETIREMENT AND DISABILITY SYSTEM				MO DA YR 02 01 70		REG 1					
6. FUNDS		V TO V		V TO CF		7. Financial Analysis No Chargeable		8. CSC OR OTHER LEGAL AUTHORITY			
CF TO V		CF TO CF		0235 CASE 000		P.L. 88-643 SECT. 231					
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/WH BRANCH 2 SECTION:						WASH., D.C.					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
CPS OFFICER						1312		D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0132.01		12 5		15173			
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. MGRY CODE	25. DATE OF BIRTH		26. DATE OF GRADE	27. DATE OF LEI	
45	10	NUMERIC ALPHABETIC					MO DA YR 03 27 1		MO DA YR	MO DA YR	
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. Correction / Cancellation Data		33. SECURITY REG NO	
MO DA YR				1 CSC 2 CIA 3 FICA 5 NONE		-70000		TYPE MO DA YR			
35. VET PREFERENCE		36. SERV COMP. DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO	
CODE 0 NONE 1 5 PT 2 10 PT		MO DA YR		MO DA YR		CAR DESV PROV TEMP		CODE CODE 0 WAIVER 1 YES		HEALTH INS CODE	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA	
CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS) 3 BREAK IN SERVICE (MORE THAN 3 YRS)						FORM EXECUTED CODE NO TAX EXEMPTIONS 1 YES 2 NO				FORM EXECUTED CODE YES TAX STATE CODE 1 YES 2 NO	
SIGNATURE OR OTHER AUTHENTICATION											
<div style="float: right; border: 1px solid black; padding: 5px; text-align: center;"> POSTED 03-05-70/jsc </div>											

FORM
5-66

1150
Mig 10-67

Use Previous
Edition

SECRET

BBG

Excluded from automatic
downgrading and
declassification

(When Filled In)

U.S. GOVERNMENT PRINTING OFFICE: 1965 O 285-000

BSJ: 4 MAR 70

NOTIFICATION OF PERSONNEL ACTION					
1. OFF					
1. SERIAL NUMBER	2. NAME (LAST FIRST-MIDDLE)				
027630	HIDALGO D N JR				
3. NATURE OF PERSONNEL ACTION			4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT	
RETIREMENT-DISABILITY-UNDER CIA RETIREMENT AND DISABILITY SYSTEM			MO DA YR 02 28 70	REGULAR	
6. FUNDS	V TO V	V TO GF	7. Financial Analysis No Chargeable		
X	CF TO V	CF TO CF	8. CSC CS TYPE: LEGAL AUTHORITY		
			P.L. 88-643 SECT. 231		
9. ORGANIZATIONAL DESIGNATIONS			10. LOCATION OF OFFICIAL STATION		
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE DESIGNATION		
OPS OFFICER		1310	D		
14. CLASSIFICATION, SCHEDULE (GS, LS, OR)	15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE		
GS	0136.01	12 5	15173		
18. REMARKS					
SIGNATURE OR OTHER AUTHENTICATION					

WAGE ADJUSTMENT IN ACCORDANCE WITH SECTION 2.2 OF P.L. 90-206 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI EFFECTIVE DATE OF OCTOBER 1968.

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME	SERIAL	DCI	FUNDS	GR-STEP	NEW SALARY
HIDALGO B N JR	027630	51	350	V	\$15,173

2

1	SERIAL NO.	2	NAME	3	ORGANIZATION	4	FUNDS	5	EWOP HOURS
	027630		HIDALGO B N JR		51	350	V		
6	OLD SALARY RATE			7	NEW SALARY RATE			8. TYPE ACTION	
	Grade	Step	Salary		Grade	Step	Salary	EFFECTIVE DATE	SI ADJ
	GS 12	4	\$13,392		GS 12	5	\$13,798	12/15/68	
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE								DATE	
<i>E. J. Farrell</i>								10 October 68	
<input checked="" type="checkbox"/> NO EXCESS EWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> EWOP STATUS AT END OF WAITING PERIOD									
CLERK'S INITIALS									
<div style="border: 1px solid black; padding: 2px;"> 027630 51 350 V 12 4 13392 12 5 13798 12 15 68 </div>									
FORM 560 E Use previous editions PAY CHANGE NOTIFICATION (43)									

CONFIDENTIAL

jc

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"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 215 OF PL 90-206 AND
EXECUTIVE ORDER 11411 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT
OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 JULY 1968

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
HIDALGO B N JR	027630	51	350	V GS 12 4	\$12,607	\$13,392

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-206
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
HIDALGO B N JR	027630	51	350	V GS 12 4	\$12,607	\$12,607

c/w #12

G 30

1. Serial No.		2. Name		3. Civil Center Number		4. LWOP Hours	
027630		HIGALSO B N JR		41-390 V			
5. OLD SALARY RATE				6. NEW SALARY RATE			
Grade	Step	Salary	Effective Date	Grade	Step	Salary	Effective Date
GS 12	3	\$11,685	12/19/65	GS 12	4	\$12,000	12/14/66
7. TYPE ACTION							
							AD
8. Remarks and Authorization							
NO EXCESS LWOP IN PAY STATUS AT END OF WAITING PERIOD LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY <i>[Signature]</i>							
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.							
SIGNATURE: <i>[Signature]</i>				DATE: Dec 12 1966			
PAY CHANGE NOTIFICATION							

77337

P

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)									
029630		FELAGU, B. N. OR.									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND CASHAWITY SYSTEM						14/66		REGULAR			
6. FUNDS		7. COST CENTER NO. (CHARGEABLE)		8. CSC OR OTHER LEGAL AUTHORITY		9. CIP TO V		10. CIP TO C		11. CIP TO V	
X		1002		1002		1002		1002		1002	
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DUP/WH						WASH., D. C.					
11. POSITION/TITLE				12. POSITION NUMBER				13. SERVICE DESIGNATION			
14. CLASSIFICATION SCHEDULE (GS, LO, ON)				15. OCCUPATIONAL SERIES				16. GRADE AND STEP			
17. SALARY OR RATE				18. SALARY OR RATE				19. SALARY OR RATE			
20. REMARKS YOU ARE HEREBY NOTIFIED OF YOUR RIGHT TO APPEAL THIS ACTION TO THE DIRECTOR OF CENTRAL INTELLIGENCE IN ACCORDANCE WITH THE PROVISIONS OF HR 20150. SUCH APPEAL MUST BE RECEIVED IN THE OFFICE OF THE DIRECTOR WITHIN 30 CALENDAR DAYS FROM THE EFFECTIVE DATE OF THIS ACTION.											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
21. ACTION CODE		22. OFFICE CODE		23. STATION CODE		24. CATEGORY CODE		25. DATE OF BIRTH		26. DATE OF ACTION	
27. DATE OF BIRTH		28. DATE OF ACTION		29. DATE OF BIRTH		30. DATE OF ACTION		31. DATE OF BIRTH		32. DATE OF ACTION	
33. DATE OF BIRTH		34. DATE OF ACTION		35. DATE OF BIRTH		36. DATE OF ACTION		37. DATE OF BIRTH		38. DATE OF ACTION	
39. DATE OF BIRTH		40. DATE OF ACTION		41. DATE OF BIRTH		42. DATE OF ACTION		43. DATE OF BIRTH		44. DATE OF ACTION	
45. DATE OF BIRTH		46. DATE OF ACTION		47. DATE OF BIRTH		48. DATE OF ACTION		49. DATE OF BIRTH		50. DATE OF ACTION	
51. DATE OF BIRTH		52. DATE OF ACTION		53. DATE OF BIRTH		54. DATE OF ACTION		55. DATE OF BIRTH		56. DATE OF ACTION	
57. DATE OF BIRTH		58. DATE OF ACTION		59. DATE OF BIRTH		60. DATE OF ACTION		61. DATE OF BIRTH		62. DATE OF ACTION	
63. DATE OF BIRTH		64. DATE OF ACTION		65. DATE OF BIRTH		66. DATE OF ACTION		67. DATE OF BIRTH		68. DATE OF ACTION	
69. DATE OF BIRTH		70. DATE OF ACTION		71. DATE OF BIRTH		72. DATE OF ACTION		73. DATE OF BIRTH		74. DATE OF ACTION	
75. DATE OF BIRTH		76. DATE OF ACTION		77. DATE OF BIRTH		78. DATE OF ACTION		79. DATE OF BIRTH		80. DATE OF ACTION	
81. DATE OF BIRTH		82. DATE OF ACTION		83. DATE OF BIRTH		84. DATE OF ACTION		85. DATE OF BIRTH		86. DATE OF ACTION	
87. DATE OF BIRTH		88. DATE OF ACTION		89. DATE OF BIRTH		90. DATE OF ACTION		91. DATE OF BIRTH		92. DATE OF ACTION	
93. DATE OF BIRTH		94. DATE OF ACTION		95. DATE OF BIRTH		96. DATE OF ACTION		97. DATE OF BIRTH		98. DATE OF ACTION	
99. DATE OF BIRTH		100. DATE OF ACTION		101. DATE OF BIRTH		102. DATE OF ACTION		103. DATE OF BIRTH		104. DATE OF ACTION	
105. DATE OF BIRTH		106. DATE OF ACTION		107. DATE OF BIRTH		108. DATE OF ACTION		109. DATE OF BIRTH		110. DATE OF ACTION	
111. DATE OF BIRTH		112. DATE OF ACTION		113. DATE OF BIRTH		114. DATE OF ACTION		115. DATE OF BIRTH		116. DATE OF ACTION	
117. DATE OF BIRTH		118. DATE OF ACTION		119. DATE OF BIRTH		120. DATE OF ACTION		121. DATE OF BIRTH		122. DATE OF ACTION	
123. DATE OF BIRTH		124. DATE OF ACTION		125. DATE OF BIRTH		126. DATE OF ACTION		127. DATE OF BIRTH		128. DATE OF ACTION	
129. DATE OF BIRTH		130. DATE OF ACTION		131. DATE OF BIRTH		132. DATE OF ACTION		133. DATE OF BIRTH		134. DATE OF ACTION	
135. DATE OF BIRTH		136. DATE OF ACTION		137. DATE OF BIRTH		138. DATE OF ACTION		139. DATE OF BIRTH		140. DATE OF ACTION	
141. DATE OF BIRTH		142. DATE OF ACTION		143. DATE OF BIRTH		144. DATE OF ACTION		145. DATE OF BIRTH		146. DATE OF ACTION	
147. DATE OF BIRTH		148. DATE OF ACTION		149. DATE OF BIRTH		150. DATE OF ACTION		151. DATE OF BIRTH		152. DATE OF ACTION	
153. DATE OF BIRTH		154. DATE OF ACTION		155. DATE OF BIRTH		156. DATE OF ACTION		157. DATE OF BIRTH		158. DATE OF ACTION	
159. DATE OF BIRTH		160. DATE OF ACTION		161. DATE OF BIRTH		162. DATE OF ACTION		163. DATE OF BIRTH		164. DATE OF ACTION	
165. DATE OF BIRTH		166. DATE OF ACTION		167. DATE OF BIRTH		168. DATE OF ACTION		169. DATE OF BIRTH		170. DATE OF ACTION	
171. DATE OF BIRTH		172. DATE OF ACTION		173. DATE OF BIRTH		174. DATE OF ACTION		175. DATE OF BIRTH		176. DATE OF ACTION	
177. DATE OF BIRTH		178. DATE OF ACTION		179. DATE OF BIRTH		180. DATE OF ACTION		181. DATE OF BIRTH		182. DATE OF ACTION	
183. DATE OF BIRTH		184. DATE OF ACTION		185. DATE OF BIRTH		186. DATE OF ACTION		187. DATE OF BIRTH		188. DATE OF ACTION	
189. DATE OF BIRTH		190. DATE OF ACTION		191. DATE OF BIRTH		192. DATE OF ACTION		193. DATE OF BIRTH		194. DATE OF ACTION	
195. DATE OF BIRTH		196. DATE OF ACTION		197. DATE OF BIRTH		198. DATE OF ACTION		199. DATE OF BIRTH		200. DATE OF ACTION	

FORM 11-66 1130

Use Previous Edition

SECRET

FORM 11-66 1130
When Filled In

PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A DCI DIRECTIVE DATED 6 OCTOBER 1962.

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

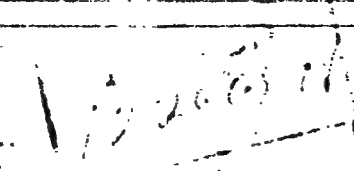
NAME	SERIAL	ORGN.	FUNDS	GRADE	OLD SALARY	NEW SALARY
WILALGO H N JR	027430	51	350	V GS 12 3	\$11,355	\$11,685

6-33

SERIAL		NAME		GRADE		FUNCTION		LWOP STATUS	
027430		WILALGO H N JR		51 500		V			
OLD SALARY RATE				NEW SALARY RATE				TYPE ACTION	
GRADE	STEP	DATE	LAST PAY DATE	GRADE	STEP	DATE	LAST PAY DATE	PA	LV
GS 12 2		10,907	12/20/64	GS 12 3		11,355	12/1/65		
		XXXXXX				XXXXXX			
<p>NO EXCESS LWOP IN PAY STATUS AT END OF WAITING PERIOD LWOP STATUS AT END OF WAITING PERIOD • CLERK'S INITIALS AUDITED BY</p>									
<p>I CERTIFY THAT THE WOPA OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE</p>									
<p>SIGNATURE: E. D. Schulte</p>									
<p>PAY CHANGE NOTIFICATION</p>									

JH: 17 DEC 65

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
027630		HIDALGO B N JR									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT						12 19 65		REGULAR			
6. FUNDS		7. TO: W		8. TO: CP		9. COST CENTER NO. CHARGEABLE		10. CSC OR OTHER LEGAL AUTHORITY			
X						6235 0620 0000		50 USC 403 J			
11. ORGANIZATIONAL DESIGNATIONS						12. LOCATION OF OFFICIAL STATION					
DOP/WH BRANCH 2 SECTION						WASH., D.C.					
13. POSITION TITLE						14. POSITION NUMBER		15. SERVICE DESIGNATION			
OPS OFFICER						1318		D			
16. CLASSIFICATION SCHEDULE (SEE 1.8.4)			17. OCCUPATIONAL SERIES			18. GRADE AND STEP		19. SALARY OR RATE			
GS			0136.01			12 3		11355			
20. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
21. ACTION CODE	22. EMPLOY CODE	23. OFFICE CODING		24. STATION CODE	25. INTEGRAL CODE	26. REGIONS CODE	27. DATE OF BIRTH		28. DATE OF GRADE		29. DATE OF LEI
37	10	51350 WH		75013			05 27 19				
30. MTE EXPIRES		31. SPECIAL REFERENCE		32. RETIREMENT DATA		33. SEPARATION DATA CODE		34. CORRECTION/CANCELLATION DATA		35. SECURITY REQ NO	
										EOD DATA	
36. VET PREFERENCE		37. SERV COMP DATE		38. LONG COMP DATE		39. CAREER CATEGORY		40. HEALTH / HEALTH INSURANCE		41. SOCIAL SECURITY NO	
42. PREVIOUS GOVERNMENT SERVICE DATA				43. LEAVE CAT				44. FEDERAL TAX DATA			
45. STATE TAX DATA				46. FEDERAL TAX DATA				47. STATE TAX DATA			
48. SIGNATURE OR OTHER AUTHENTICATION											
											

FORM 11-62 1150

Use Previous Edition

SECRET

 Form 11-62 (Rev. 1-64)
 (When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-301
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 4 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
WIDALGO R N JR	027630	51	500	V GS 12 2	\$10,605	\$10,987

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OCS 04/27/65							
1 SERIAL NUMBER 027610		2 NAME (LAST-FIRST-MIDDLE) MIDALGO B N JR					
3 NATURE OF PERSONNEL ACTION REASSIGNMENT				4 EFFECTIVE DATE MO DA YR 09 31 65		5 CATEGORY OF EMPLOYMENT	
6 FUNDS X V TO V O TO V O TO U				7 COST CENTER NO CHARGEABLE 5235 1162 0000		8 CSC OR OTHER LEGAL AUTHORITY	
9 ORGANIZATIONAL DESIGNATIONS DDP/WN DIVISION WM C MIAMI OPS BR FI SEC				10 LOCATION OF OFFICIAL STATION WASH., D. C.			
11 POSITION TITLE OPS OFFICER				12 POSITION NUMBER 1145		13 CAREER SERVICE DESIGNATION U	
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP 12		17 SALARY OR RATE	
18 REMARKS							
SIGNATURE OR OTHER AUTHENTICATION							

3CF

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
027630		MICALGO B N JR		49 997 43F						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS 12	1	\$10,250	12/22/63	GS 12	2	\$10,605	12/20/64			
8. Remarks and Authorization										
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS: <i>WV</i> AUDITED BY:										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE <i>[Signature]</i>						DATE <i>12-20-64</i>				
PAY CHANGE NOTIFICATION										

DEC 22 11 06 AM '64

DEC 22 11 06 AM '64

MHC: 2 NOV 64

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST-MIDDLE)									
027630		HIDALGO B N JR									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT						NO. DA. YR. 11 02 64		REGULAR			
6. FUNDS		X		V TO V		V TO CF		7. COST CENTER/NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY	
				CF TO V		CF TO CF		5235 1162 0000		50 USC 403 J	
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/SAS COUNTERINTELLIGENCE STAFF OPERATIONS SECTION						WASH., D. C.					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
OPS OFFICER						0887		D			
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS				0136.01		12 1		10250			
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGREE CODE		24. HOURS CODE	
37		10		NUMERIC ALPHABETIC 49150 SAS		75013		1		25. DATE OF BIRTH	
										NO. DA. YR. 05 27 19	
26. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO	
NO DA YR				1 - CSC 3 - FICA 5 - NONS				TYPE NO DA YR		34. SEX	
								EOD DATA			
35. VET. PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO	
CODE		NO DA YR		NO DA YR		CODE		CODE		CODE	
0 - NONE 1 - 5 PT 2 - 10 PT						LAB 21% PROG TEMP		D - WAIVER 1 - YES		HEALTH INS CL 20	
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA	
CODE				CODE		FORM EXECUTED CODE				FORM EXECUTED CODE	
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)						NO TAX EXEMPTIONS				NO TAX STATE CODE	
						1 - YES 2 - NO				1 - YES 2 - NO	
SIGNATURE OR OTHER AUTHENTICATION											
FROM: DEV COMP 2											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> FOOTED 11/02/64 JK </div>											

FORM 11 42 1150

Use Previous Edition

SECRET

11/02/64 JK

(When Filled In)

SALARY CONVERTED TO RATE SHOWN FOR INDIVIDUAL'S GRADE AND STEP AS INDICATED IN CHART BELOW.

[illegible]

PZR: 22 APR 64

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)									
027530		HIDALGO, E. N. JR.									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
CAREER PROVISIONAL EXCEPTED APPT				MO DA YR 04 12 64		REGULAR					
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
X		CF TO V		CF TO CF		4232 1230 1000		50 USC 403			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/SAS CS/CS DEVELOPMENT COMPLEMENT						WASH., D.C.					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
OPS OFFICER						2227					
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
CS				0130.01		12.1		2280			
18. REMARKS OTHER											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGRITY CODE	24. MONTH CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI
13	16	NUMERIC	ALPHABETIC	25013			MO DA YR	MO DA YR	MO DA YR	MO DA YR	MO DA YR
		42227	SAS				05 12 63	12 22 63	12 22 63	12 22 63	
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO	
MO DA YR				1. CAC 2. FICA 3. NONE		CODE		TYPE MO DA YR		00000	
								EOD DATA		34. SEX	
										M	
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO	
CODE		MO DA YR		MO DA YR		CODE		CODE			
0		07 11 63		11 7 64		P		1 YES			
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA			
CODE				CODE		CODE		CODE			
1				0		0		0			
SIGNATURE OR OTHER AUTHENTICATION											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED 429.64 401 </div>											

FORM 11-62 1150

Old Previous Edition

22 APR 64

SECRET

GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

SECRET
(When Filled In)

REF: 28 APR 64

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 027830		2. NAME (LAST-FIRST-MIDDLE) Kendall, B. J.	
3. NATURE OF PERSONNEL ACTION RESIGNATION		4. EFFECTIVE DATE 04 25 64	5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS V TO V CF TO V	V TO CF X CF TO CF	7. COST CENTER NO. CHARGEABLE 4132 2001 1000	8. CSC OR OTHER LEGAL AUTHORITY
9. ORGANIZATIONAL DESIGNATIONS DOP/SAS US FIELD FORWARD OPERATIONS STATION-JMWAVE CI SECTION		10. LOCATION OF OFFICIAL STATION JMWAVE	
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 0731	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS	15. OCCUPATIONAL SERIES 0136:01	16. GRADE AND STEP 12 1	17. SALARY OR RATE 9390
18. REMARKS <div style="text-align: right; border: 1px solid black; padding: 5px; display: inline-block;"> FILED ON 29 APR 64 </div>			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL			
19. ACTION CODE 45	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC	22. STATION CODE
23. INTEGRITY CODE	24. MILEAGE CODE	25. DATE OF BIRTH 05 27 19	26. DATE OF GRADE NO DA YR
27. DATE OF LEI NO DA YR	28. DATE OF BIRTH NO DA YR	29. SPECIAL REFERENCE 1 CSC 2 PFC 3 NONE	30. RETIREMENT DATA CODE
31. SEPARATION DATA CODE 180001	32. CORRECTION/CANCELLATION DATA TYPE NO DA YR	33. SECURITY REQ NO	34. SEN
35. NET. PREFERENCE 0 NONE 1 5 PT 2 10 PT	36. SERV. COMP. DATE NO DA YR	37. LONG COMP. DATE NO DA YR	38. CAREER CATEGORY CODE
39. FEGLI / HEALTH INSURANCE 0 - WAIVER 1 - YES	40. SOCIAL SECURITY NO	41. PREVIOUS GOVERNMENT SERVICE DATA 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS) 3 BREAK IN SERVICE (MORE THAN 3 YRS)	42. LEAVE CAT. CODE
43. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX ABSEPTIONS	44. STATE TAX DATA FORM EXECUTED CODE NO TAX EASMP	45. STATE CODE	46. STATE CODE
47. SIGNATURE OR OTHER AUTHENTICATION <div style="border: 1px solid black; padding: 10px; display: inline-block; transform: rotate(-10deg);"> 429-64 41 </div>			

FORM 11-62 1150

Use Previous Edition

SECRET

28 APR 64

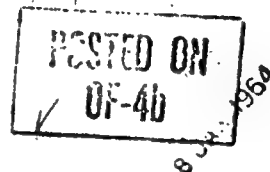
GROUP 1
Excluded from automatic
downgrading and
declassification

(When Filled In)

SAS

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI
MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS,
EFFECTIVE 5 JANUARY 1964.

NAME	SERIAL	ORGN	FUNDS	GR-ST	OLD SALARY	NEW SALARY
<i>Hedalye, B. H. Jr.</i>	027630	49	730	CF GS 12 1	\$ 9,475	\$ 9,980



SECRET
(When Filled In)

300. 20 DEC 63

NOTIFICATION OF PERSONNEL ACTION

NOTIFICATION OF PERSONNEL ACTION																	
1. SERIAL NUMBER		2. NAME (LAST, FIRST, MIDDLE)															
027530		Hudango, B. J.															
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT									
PROMOTION						12/22/63		REGULAR									
6. FUNDS		V TO V		V TO CP		7. COST CENTER NO. CHARGEABLE		8. USE OR OTHER LEGAL AUTHORITY									
CP TO V		X		CP TO CP		4132 2001 1000		50 USC 403 J									
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION											
DOF SPECIAL AFFAIRS STAFF U. S. FIELD FORWARD OPERATIONS STATION-JMWAVE CI SECTION						JMWAVE											
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION									
OPS. OFFICER						0731		D									
14. CLASSIFICATION SCHEDULE (GS, LH, etc.)				15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE									
GS				0136.01		12 1		0175									
18. REMARKS																	
<div style="border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> 30 Dec 63 </div>																	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGER CODE		24. HOURS CODE		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI	
22		10		40730 SAS		00000		2		05/27/19		12/22/63		12/22/63		12/22/63	
28. HTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO.		34. SEN					
NO DA YR				1. CSC 2. FICA 3. NONE		CODE		TYPE NO DA YR		EOD DATA							
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. PEGS / HEALTH INSURANCE		40. SOCIAL SECURITY NO.							
CODE 1. NONE 2. 5 PT 3. 10 PT		NO DA YR		NO DA YR		CA4 51% PAC 11%		CODE CODE 0 WAIVER 1 YES		HEALTH INS COI							
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE		43. FEDERAL TAX DATA				44. STATE TAX DATA							
CODE 1. NO PREVIOUS SERVICE 2. NO BREAK IN SERVICE 3. BREAK IN SERVICE (LESS THAN 3 YRS) 4. BREAK IN SERVICE (MORE THAN 3 YRS)				1 YES 2 NO		FORM EXECUTED CODE NO TAX EXEMPTIONS 1 YES 2 NO				FORM EXECUTED CODE NO TAX EXEMPTIONS 1 YES 2 NO				CODE NO TAX EXEMPT. STATE CODE			
SIGNATURE OR OTHER AUTHENTICATION																	
<div style="border: 1px solid black; padding: 10px; width: fit-content; margin: 0 auto;"> 12/27/63 JK </div>																	

SECRET
(When Filled In)

LLG: 25 APRIL 63

OAB NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER 037630		2. NAME (LAST FIRST MIDDLE) Harris, W. J.									
3. NATURE OF PERSONNEL ACTION EXCEPTED APPOINTMENT CAREER PROVISIONAL						4. EFFECTIVE DATE MO DA YR 04 29 63		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS		7. V TO V		8. V TO CF		9. COST CENTER NO. CHARGEABLE 3152 2001 1000		10. CSC OR JIN-R LEGAL AUTHORITY 50 USC 403 J			
11. ORGANIZATIONAL DESIGNATIONS DDP SPECIAL AFFAIRS STAFF U. S. FIELD FORWARD OPERATIONS STATION-JMWAVE CI SECTION						12. LOCATION OF OFFICIAL STATION JMWAVE					
13. POSITION TITLE OPS OFFICER						14. POSITION NUMBER 0732		15. SERVICE DESIGNATION O			
16. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS				17. OCCUPATIONAL SERIES 0136.01		18. GRADE AND STEP 11 4		19. SALARY OR RATE 8840			
20. REMARKS <div style="text-align: right;"> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED ON 21-07-63 6 MAY 1963 </div> </div>											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
21. ACTION CODE 13		22. EMPLOY CODE 10		23. OFFICE CODING NUMERIC 61730 ALPHABETIC SAS		24. STATION CODE 99999		25. INTEGREE CODE 2		26. DATE OF BIRTH MO DA YR 05 27 19	
27. DATE OF GRADE MO DA YR 03 17 58		28. DATE OF LEI MO DA YR 09 16 62		29. NTE EXPIRES MO DA YR		30. SPECIAL REFERENCE		31. RETIREMENT DATA 1. LSC 2. FICA 3. NONE CODE 1		32. SEPARATION DATA CODE	
33. CORRECTION/CANCELLATION DATA TYPE MO DA YR		34. SECURITY REQ NO 27630		35. SEX M1		36. VET. PREFERENCE CODE 0 0 NONE 1 5 PT 2 10 PT		37. SERV. COMP. DATE MO DA YR 07 16 46		38. LONG. COMP. DATE MO DA YR 03 17 58	
39. CAREER CATEGORY CODE 0 0 NONE 1 5 PT 2 10 PT		40. FEDERAL TAX DATA FORM EXECUTED CODE 0 1 YES 2 NO		41. STATE TAX DATA FORM EXECUTED CODE 0 1 YES 2 NO		42. SOCIAL SECURITY NO		43. SIGNATURE OR OTHER AUTHENTICATION		44. SIGNATURE OR OTHER AUTHENTICATION	
<div style="text-align: right;"> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED 15/07/63 WK </div> </div>											

FORM 1150
11-62

Use Previous
Edition

SECRET 25 APR 1963

14-911
(When Filled In)

SECRET
(When Filled In)

RZR: 25 APR 63

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)									
027630		HIDALCO B N JR									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
RESIGNATION						04 27 63		REGULAR			
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY							
X		3232 1000 1000									
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP/SPECIAL AFFAIRS STAFF FI/CI BRANCH						WASH., D.C.					
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION			
OPS OFFICER						0632		D			
14. CLASSIFICATION SCHEDULE (GS, LO, WH)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP			17. SALARY OR RATE		
GS			0136.01			11 4			8940		
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODING		22. STATUS CODE		23. INTEGREE CODE		24. REGIONS CODE	
45		10		NUMERIC ALPHABETIC							
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LBI		28. DATE OF RETIREMENT		29. SEPARATION DATA CODE		30. CORRECTION/CANCELLATION DATA	
05 27 19								1ED0031		EOD DATA	
31. VET PREFERENCE		32. SERV COMP. DATE		33. LONG COMP. DATE		34. CAREER CATEGORY		35. FEDERAL HEALTH INSURANCE		36. SOCIAL SECURITY NO.	
CODE		NO DA FR		NO DA FR		CAR SERV		CODE		CODE	
0 - NONE		NO DA FR		NO DA FR		CAR SERV		CODE		CODE	
1 - 5 PT		NO DA FR		NO DA FR		CAR SERV		CODE		CODE	
2 - 10 PT		NO DA FR		NO DA FR		CAR SERV		CODE		CODE	
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT				43. FEDERAL TAX DATA			
CODE				CODE				CODE			
0 - NO PREVIOUS SERVICE				FORM EXEMPTED				FORM EXEMPTED			
1 - NO BREAK IN SERVICE				1 - YES				1 - YES			
2 - BREAK IN SERVICE LESS THAN 2 YRS				2 - NO				2 - NO			
3 - BREAK IN SERVICE MORE THAN 2 YRS											
SIGNATURE OR OTHER AUTHENTICATION											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED <i>AS/CI 37K</i> </div>											

FORM 1150
11 62Use Previous
Edition

SECRET

GROUP 1
EXCLUDED FROM AUTOMATIC
DOWNGRADING AND
DECLASSIFICATION

14 811

(When Filled In)

ARM: 20 NOV 62

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION												
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)										
027630		HICALGO B N JR										
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT				
REASSIGNMENT						11 20 62		REGULAR				
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY								
X		3232 1000 1000		50 USC 403 J								
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION						
DDP TASK FORCE "W" FI-CI BRANCH						WASH., D. C.						
11. POSITION TITLE						12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION				
OPS OFFICER						0682		D				
14. CLASSIFICATION SCHEDULE (GS, LR, etc.)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP			17. SALARY OR RATE			
GS			0136.01			11 4			8840			
18. REMARKS												
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGRITY CODE	24. MAJOR CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI	
37	10	NUMERIC	ALPHABETIC	75013		1	MO	DA	YR	MO	DA	YR
							05	27	19			
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO		34. SEN.
MO DA YR		1. CSC 2. OFFICE 3. NONE		CODE		TYPE		MO DA YR		FOD DATA		
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG. COMP. DATE		38. CAREER CATEGORY		39. FEGLI - HEALTH INSURANCE		40. SOCIAL SECURITY NO		
CODE		MO DA YR		MO DA YR		CODE		CODE		CODE		
0 - NONE 1 - 5 PT 2 - 10 PT						CAG BNSL PMSL TSWP		0 - WAIVER 1 - YES		HEALTH INS. CODE		
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT		43. FEDERAL TAX DATA		44. STATE TAX DATA				
CODE				CODE		CODE		CODE				
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)				1 - YES 2 - NO		NO TAX EXEMPTIONS		FORM EXECUTED 1 - YES 2 - NO				
SIGNATURE OR OTHER AUTHENTICATION												
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> POSTED </div>												

FORM 462 1150

Use Previous Edition

SECRET

122.7
Exempt from automatic
downgrading and
declassification

(When Filled In)

16-811

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87 - 793 AND
 DCI MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS.
 EFFECTIVE 16 OCTOBER 1962


NAME	SERIAL	ORGN	FUNDS	OLD GRST SALARY	NEW GRST SALARY
HIDALGO B N JR	027630	64075	V	11 4 \$ 8340	11 4 \$ 8840

235-1000

1 Serial No		2 Name		3 Cost Center Number		4 LWOP Hours	
027630		HIDALGO B N JR		64 075 V /			
5 OLD SALARY RATE				6 NEW SALARY RATE			
Grade	Step	Salary	Last EM Date	Grade	Step	Salary	Effective Date
S 11 3		\$ 8,080	03/19/61	S 11 4		\$ 8,340	09/16/62
7 TYPE ACTION							
8 Remarks and Authorization / / NO EXCESS LWOP / / EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD / / IN LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS <i>img</i> AUDITED BY <i>[Signature]</i> PAY CHANGE NOTIFICATION							

AES: 17 JAN 62

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
OCF											
1. SERIAL NUMBER: 2. NAME (LAST-FIRST-MIDDLE)											
027630 HIDALGO B N JR											
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT						01 17 62		REGULAR			
6. FUNDS						7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
X						2235 1000 1000		50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP WH PLANS & OPERATIONS STAFF SECTION A						WASH., D.C.					
11. POSITION TITLE						12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION			
OPS OFFICER						0641		D			
14. CLASSIFICATION SCHEDULE (GS, L8, etc)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP			17. SALARY OR RATE		
GS			0136.01			11 3			8080		
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEREST CODE	24. HOURS CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEL
37	10	64075 WH		75013		1	05 27 19				
28. DTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO	34. SER
								EOD DATA			
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. MIL SERV CREDIT/LED		39. FEGLI/HEALTH INSURANCE		40. SOCIAL SECURITY NO	
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT		43. FEDERAL TAX DATA		44. STATE TAX DATA			
SIGNATURE OR OTHER AUTHENTICATION											
<div style="text-align: right;">  1/18/62 Jm </div>											

Form 861 1150

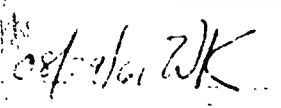
Use Previous Edition

SECRET

14-011

ARE: 18 AUG 1961

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)							
027630		HIDALGO B N JR							
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT		
REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS					08 20 61		REGULAR		
6. FUNDS		7. TO V		8. TO CP		9. COST CENTER NO CHARGEABLE		10. CSC OR OTHER LEGAL AUTHORITY	
X		U TO V		CP TO CP		2635 5000 8021		50 USC 403 J	
11. ORGANIZATIONAL DESIGNATIONS					12. LOCATION OF OFFICIAL STATION				
DDP WH BRANCH 4 FI CI SECTION					WASH., D. C.				
13. POSITION TITLE					14. POSITION NUMBER		15. CAPTER SERVICE DESIGNATION		
OPS OFFICER					0681		D		
16. CLASSIFICATION (GS, GS, GS, GS)			17. GRADE AND STEP		18. SALARY OR RATE				
GS			0136.01		11 3 8060				
19. REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
20. ACTION CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGREE CODE		24. DATE OF BIRTH	
16		10		64450 WH		75013		1 05 27 19	
25. DATE OF EXPIRY		26. SPECIAL REFERENCE		27. RETIREMENT DATA		28. SEPARATION DATA CODE		29. CORRECTION/CANCELLATION DATA	
NO DA 10		1 - LSC 2 - FICR 3 - NONE		CODE		TYPE NO DA 10		30. SECURITY REQ NO	
31. NET PREFERENCE		32. SERV COMP DATE		33. LONG COMP DATE		34. MIL SLOW CREDIT/LED		35. PEGEL / HEALTH INSURANCE	
CODE 0 - NONE 1 - 0.01 2 - 0.02		NO DA 10		NO DA 10		CODE 0 - YES 1 - NO		CODE 0 - YES 1 - NO	
36. PREVIOUS GOVERNMENT SERVICE DATA				37. LEAVE CAT		38. PENTAL TAX DATA		39. STATE TAX DATA	
CODE 0 - NO PREVIOUS SERVICE 1 - NO SERVICE IN SERVICE 2 - SERVICE IN SERVICE (LESS THAN 12 MOS) 3 - SERVICE IN SERVICE (MORE THAN 12 MOS)				CODE 0 - YES 1 - YES 2 - NO		CODE 0 - YES 1 - YES 2 - NO		CODE 0 - YES 1 - YES 2 - NO	
SIGNATURE OR OTHER AUTHENTICATION									
<div style="text-align: right;">  B. N. HIDALGO </div>									

SECRET
(When Filled In)

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours					
527630		HIDALGO R N JR		DDP/WH 3A UV							
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION			
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ	
GS	11	2	7,820	09/20/59	11	3	8,040	04/19/61			
8. Remarks and Authentication											
<p>NO EXCESS LWOP</p> <p>IN PAY STATUS AT END OF WAITING PERIOD</p> <p>IN LWOP STATUS AT END OF WAITING PERIOD</p> <p align="center">ED. CHOLE WK</p> <p align="center">PAY CHANGE NOTIFICATION</p>											

Form 560

Obsolete Previous Edition

SECRET

(C 31)

L-1

SECRET

(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

ADPD 09/21/64

1. VISA NUMBER

2. NAME (Last, First, Middle)

827630

MICALGO R N JR

3. NATURE OF PERSONNEL ACTION

4. EFFECTIVE DATE

5. CATEGORY OF EMPLOYMENT

CONV. TO CAREER EMPLOYEE STATUS

03 17 61

6. FUNDS

A

F TO V

V TO U

7. COST CENTER NO. (CHARGEABLE)

8. CM OR OTHER LEGAL AUTHORITY

(F TO V)

(V TO U)

4232 1990 1000

9. ORGANIZATIONAL DESIGNATION

DDP/SAS

10. LOCATION OF OFFICIAL STATION

11. POSITION TITLE

12. POSITION NUMBER

13. CAREER GRADE DESIGNATION

U

14. CLASSIFICATION SCHEDULE (45, 10, 101)

15. OCCUPATIONAL SERIES

16. GRADE AND STEP

17. SALARY OR RATE

18. REMARKS

SIGNATURE OR OTHER AUTHENTICATION

Form 1-63 11508
1-63 WAC 1-63Use Previous
Edition

SECRET

Get it
Included in the
document
Section 1-63

(When Filled In)

(4-51)

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-566 AND DCI MEMO DATED
1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

SD	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
D	HIDALGO B N JR	527630	46 17	GS-11 2	\$ 7,270	\$ 7,820

/S/

EMMETT D. ECHOLS
DIRECTOR OF PERSONNEL

SECRET

AES: 24 JUNE 1960													NOTIFICATION OF PERSONNEL ACTION														
1. Serial No.				2. Name (Last-First-Middle)								3. Date Of Birth				4. Sex				5. Race				6. CS-FOO			
527630				HIDALGO B N JR								Mo 05 Da 27 Yr 19				Male				M 1				Mo 03 Da 17 Yr 58			
7. SCB				8. CSC Permit				9. CSC Or Other Legal Authority				10. Appt. Affidvt				11. FEGLI				12. LFO				13. Elected			
Mo 07 Da 16 Yr 46				Yes-1 No-2 1				50 USCA 403				Mo Da Yr				Yes-1 No-2 03				Mo Da Yr 17 58				Yes-1 No-2 2			

PREVIOUS ASSIGNMENT

14. Organizational Designations										Code		15. Location Of Official Station										Station Code	
DDS OTR OPERATIONS SCHOOL COVERT TRAINING										1172		WASH., D. C.										75013	
16. Duty Field				17. Position Title				18. Position No.				19. Serv				20. Occup. Series							
Dept - 1 Unit - 3 Frm - 5				3 INSTRUCTOR OPERS				1014				2				1711.50							
21. Grade & Step				22. Salary Or Rate				23. SD				24. Date Of Grade				25. PSI Dtg				26. Appropriation Number			
11 2				\$ 7270				D				Mo Da Yr Mo Da Yr 03 17 58 09 20 59				9 7500 30 018							

ACTION

27. Nature Of Action				Code		28. Eff. Date				29. Type Of Employee				Code		30. Separation Data			
REASSIGNMENT				57		Mo Da Yr 04 24 60				REGULAR				01					

PRESENT ASSIGNMENT

31. Organizational Designations										Code		32. Location Of Official Station										Station Code	
DDP WH BRANCH 4										4617		WASH., D. C.										75013	
33. Duty Field				34. Position Title				35. Position No.				36. Serv				37. Occup. Series							
Dept - 1 Unit - 3 Frm - 5				1 OPS OFFICER				0626				25				0136.01							
38. Grade & Step				39. Salary Or Rate				40. SD				41. Date Of Grade				42. PSI Dtg				43. Appropriation Number			
11 2				\$ 7270				D				Mo Da Yr Mo Da Yr 03 17 58 03 19 60				0135 1000 1000							

44. Remarks

06-27-60 J.K.

SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME		3. ASSIGNED GRADE		4. FLDS		5. ALLOTMENT	
527630		MIDALGO B H JK		DGS/TRNG 21		UV			
6. OLD SALARY RATE					7. NEW SALARY RATE				
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE
GS 11	1	\$ 7,030	03	17	56	GS 11	2	\$ 7,270	09 20 59
TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER									
8. CHECK ONE <input checked="" type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP					9. NUMBER OF HOURS LWOP				
IF EXCESS LWOP, CHECK FOLLOWING:					10. INITIALS OF CLERK				
<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD					AUDITED BY				
<input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD									
TO BE COMPLETED BY THE OFFICE OF PERSONNEL									
12. PROJECTED SALARY RATE AND EFFECTIVE DATE					13. REMARKS				
GRADE	STEP	SALARY				L 756			
14. AUTHENTICATION									
<div style="position: absolute; top: 0; right: 0; text-align: right;"> PL 9/2/59 MC 4/6/59 VII </div>									

PERIODIC STEP INCREASE - AUTHENTICATION

FORM NO. 560a
1 MAR. 55

SECRET

PERSONNEL FOLDER 101

SECRET

JEC:12 JUNE 59												NOTIFICATION OF PERSONNEL ACTION											
1. Serial No.		2. Name (Last-First-Middle)						3. Date Of Birth			4. Vet. Pref.		5. Sex		6. CSC: ESC								
527630		HIDALGO B N JR						Mo. Da. Yr. 05 27 19			Non-O Code 5 Pt-1 1 10 Pt-2		M 1		Mo. Da. Yr. 03 17 55								
7. SCD		8. CSC Reas.		9. CSC Or Other Legal Authority				10. Appr. Allday			11. FEGLI		12. LCD		13. Grade Code								
Mo. Da. Yr. 07 16 46		Yes-1 Code No-2 1		50 USCA 403.8				Mo. Da. Yr. 07 16 46			Yes-1 Code No-2 1		Mo. Da. Yr. 03 17 58		Yes-1 Code No-2 2								

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDP WH BRANCH 1P1 CENTRAL AMERICA SECTION				4613		WASH., D.C.				75013	
16. Dept. Field		17. Position Title		18. Position No.		19. Serv.		20. Occup. Series			
Dept. - 1 Field - 3 Ingn. - 5		Code 2 AREA OPS OF		0486		GS		0136.01			
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
11 1		\$ 7030		D		Mo. Da. Yr. 03 17 58		Mo. Da. Yr. 09 20 57		8 3500 20	

ACTION

27. Feature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
REASSIGNMENT TRANSFER TO CONFIDENTIAL FUNDS		05		Mo. Da. Yr. 06 14 59		REGULAR		01			

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDS OTR OPERATIONS SCHOOL COVERT TRAINING				1172		WASH., D. C.				75013	
33. Dept. Field		34. Position Title		35. Position No.		36. Serv.		37. Occup. Series			
Dept. - 1 Field - 3 Ingn. - 5		Code 3 INSTRUCTOR EXPERS		1914		IS		1711.50			
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
11 1		\$ 7030		D		Mo. Da. Yr. 03 17 58		Mo. Da. Yr. 03 20 59		9 7500 20 018	

44. Remarks

POSTED

CP

S E C R E T

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE
 12 JANUARY 1958 AUTHORIZED BY P. L. 85 - 462 AND DCI
 DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
HIDALGO R N JR	127630	GS-11-1	\$ 6,390	\$ 7,030

GORDON M. STEWART
 /S/ DIRECTOR OF PERSONNEL

S E C R E T

SECRET

(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

LVL 16 MAY 58

1. Serial No.		2. Name (Last-First-Middle)		3. Date Of Birth			4. Vol. Prob.		5. Sex		6. GS - EOD		
127630		BALMES N. HIDALGO, JR.		Mo.	Da.	Yr.	None-0	Code		Mo.	Da.	Yr.	
7. SCD		8. CSC Reent.		9. CSC Or Other Legal Authority		10. Appt. Affidav.		11. FEGLI		12. LCD		13. Other Lco	
Mo.	Da.	Yr.	Yes-1	Code		Mo.	Da.	Yr.	Yes-1	Code	Mo.	Da.	Yr.
07	16	46	No-2	1		03	13	58	No-2	1	03	17	58
		50 USCA 403.4											

PREVIOUS ASSIGNMENT

14. Organizational Designations		Code		15. Location Of Official Station		Station Code	
16. Dept. - Field		17. Position Title		18. Position No.		19. Ser. 20. Occup. Ser. or	
Dept. - 2	Code						
USStd. - 4							
Frqn. - 6							
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade	
		\$				Mo. Da. Yr.	
						Mo. Da. Yr.	
						25. PSI Due	
						Mo. Da. Yr.	
						26. Appropriation Number	

ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
EXCEPTED APPOINTMENT		12		03 17 58		REGULAR		01			
CORRECTION*											

PRESENT ASSIGNMENT

31. Organizational Designations		Code		32. Location Of Official Station		Station Code	
DDP WH				WASH., D.C.		175013	
BRANCH 111		4613					
CENTRAL AMERICA SECTION							
33. Dept. - Field		34. Position Title		35. Position No.		36. Ser. 37. Occup. Series	
Dept. - 2	Code			0486		GS 0136.01	
USStd. - 4							
Frqn. - 6	2	AREA OPS OF					
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade	
11 1		\$ 6300				Mo. Da. Yr.	
						Mo. Da. Yr.	
						42. PSI Due	
						Mo. Da. Yr.	
						43. Appropriation Number	
44. Remarks							
*THIS ACTION CORRECTS SF 1150 EFF 17 MAR 58, ITEM #2, THE NAME, WHICH READ BALMES N. HIDALGO TO READ BALMES N. HIDALGO, JR.							

SECRET

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION															
LVL 17 MAR 58															
1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth			4. Vet. Pref.		5. Sex		6. CS - EOD		
127630		BALMES N. HIDALGO HIDALGO BALMES N				Mo. Da. Yr. 05 27 19			None-0 5 Pt-1 10 Pt-2 1		M 1		Mo. Da. Yr. 03 17 58		
7. SCD		8. CSC Retit.		9. CSC Or Other Legal Authority		10. Apmt. Affidav.			11. FEGLI		12. LCD		13. Serv. Credit Acc.		
Mo. Da. Yr. 07 16 56		Yes-1 No-2 1		Code 50 USCA 403		Mo. Da. Yr. 03 13 53			Yes-1 No-2 1		Mo. Da. Yr. 03 17 53		Yes-1 No-2 2		

PREVIOUS ASSIGNMENT

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
16. Dept. - Field		17. Position Title				18. Position No.		19. Serv.		20. Occup. Series	
Dept. - 2 USMld - 4 Frgr - 5		Code									
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
		\$				Mo. Da. Yr.		Mo. Da. Yr.			

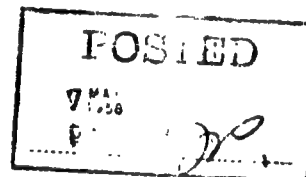
ACTION

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Data	
EXCEPTED APPOINTMENT		13		03 17 58		REGULAR		01			

PRESENT ASSIGNMENT

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDP WH BRANCH 111 CENTRAL AMERICA SECTION				4613		WASH., D.C.				75013	
33. Dept. - Field		34. Position Title				35. Position No.		36. Serv.		37. Occup. Series	
Dept. - 8 USMld - 4 Frgr - 6		Code 2 AREA OPS OF				0486		US		0136.01	
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
11 1		\$ 6300		D		Mo. Da. Yr. 03 17 58		Mo. Da. Yr. 09 120 53		8 3500 2	

44. Remarks



FITNESS RPTS
1966 - 1969

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				027630	
SECTION A GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE
HIDALGO, RAFAEL, JR.			27 May 1919	M	GS-12
5. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION	
Ops Officer			DDP/PLC	Headquarters	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY			<input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From to)		
			15 March - 31 October 1965		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					RATING LETTER
SPECIFIC DUTY NO. 1 Headquarters desk officer responsible for the support of Miami Station CI/CE activities and operations.					P
SPECIFIC DUTY NO. 2 Advisor to various components of the WH and WE Divisions on Cuban operations with specific reference to the Cuban Security Intelligence Service, organization, modus operandi and					S
SPECIFIC DUTY NO. 3 Briefing representatives of personnel, foreign liaison services and selected agents visiting in Washington on the Cuban Security and Intelligence Services and his own unique experience in the Communist Party.					S
SPECIFIC DUTY NO. 4 Translator/Interpreter: Served as consultant to WH Division on Cuban Spanish.					S
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER
4 JAN 1966					S

SECRET

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B if possible, but basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p>			
<p>Mr. Hidalgo is an able intelligence officer, devoted to his profession and selfless in his desire to be of service to the Government. Although he has suffered ill health in recent years, he was insistent that he be among the first to be sent to the Dominican Republic when the crisis occurred.</p>			
<p>An intense person, Mr. Hidalgo is industrious, works well under pressure and sets high standards for his performance. Because he is intent on getting things done, he is occasionally hasty in judgment and in written presentation of the results of his research and conclusions. He is perceptive, quickly accepts suggestions and offers counter-proposals with cogent argument. Mr. Hidalgo was not in a supervisory capacity. He was cost conscious; always endeavoring to be conservative where possible.</p>			
<p>He is an effective and cooperative member of an office, ready to assume responsibility and to help his colleagues. Thanks to his unique experience on the Cuban target, he has wide knowledge of the Cuban problem and is, in fact, an expert on the Cuban Security and Intelligence Services.</p>			
SECTION D			
CERTIFICATION AND COMMENTS			
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
9 December 1965	<i>[Signature]</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
8 months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/WH/C/MO/FI-CI	<i>[Signature]</i> Susan L. Darling	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>I concur with the supervisor's assessment of Mr. Hidalgo with no exception to the statement that Subject works well under pressure. He is indeed an intense person and, under great pressure, his involvement affects his performance; and even more important, it has a very bad effect on his health. With this consideration noted, the undersigned thinks very highly of Mr. Hidalgo and would be pleased to be associated with him again.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/WH/C/MO	Walter T. Cini <i>[Signature]</i>	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				027630	
SECTION A				GENERAL	
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE 5. SD
HIDALGO, Balmes N.			27 May 1919	M	12 D
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT 8. CURRENT STATION		
Ops Officer			DDP/SAS Washington		
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input type="checkbox"/> SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
31 January 1965			9 April 1964--15 March 1965		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 Participated (with other WH/SA/CI officers) in the handling and debriefing of a defected intelligence officer housed in the Headquarters area.					RATING LETTER S
SPECIFIC DUTY NO. 2 Served as Headquarters desk case officer for several counterintelligence operations--prepared cables, dispatches, and memoranda pertaining to these operations.					RATING LETTER P
SPECIFIC DUTY NO. 3 Assisted in translations and preparation of operational documents in Spanish (s/w messages, cover letters, owl messages, etc.).					RATING LETTER S
SPECIFIC DUTY NO. 4 Served as case officer for a counterintelligence operation (the agent was located in New York City) which included the debriefing, assessing, training, and dispatching of the agent to a denied area (Cuba).					RATING LETTER P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					S
29 MAR 1965					

SECRET

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. <u>Manner of performance of managerial or supervisory duties must be described if applicable.</u></p>			
<p>Mr. Hidalgo's fluent knowledge of Cuban Spanish, his previous experience in DD/P Cuban operations, and his broad knowledge of Cuba (people, geography, customs, etc.) made him a particularly useful and versatile operations officer during his assignment in the WH/SA counterintelligence operations section. As indicated in Section B, (specific duties) he performed a wide variety of duties.</p>			
<p>Mr. Hidalgo approached and performed his assignments with enthusiasm, keenness, dedication, and promptness. He displayed a particular talent for conducting debriefings, and it was in this type activity that he performed best. He also writes well which added to his debriefing capability as well as to his performance as a Headquarters desk operations officer in writing cables, dispatches, memoranda, etc. Mr. Hidalgo is cost conscious and effective in the use of space, equipment and funds. He does not hold a supervisory position.</p>			
<p>Mr. Hidalgo performed most of his duties with a minimum of supervision. In a few instances, however, he had a tendency (in his eagerness and desire to get the job done well) to become impatient with the slow and deliberate pace of progress which is sometimes necessary in operational activities. In these few instances, Mr. Hidalgo's work required supervision by a senior operations officer.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	23 March 65	SIGNATURE OF EMPLOYEE	<i>[Signature]</i>
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION		IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
11 Months			
DATE	23 March 1965	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
		WH/SA/CI/COPS	Richard Tansing
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>Mr. Hidalgo is a sound operations officer with native fluency in Spanish. His impatience is with administrative delays rather than with operational problems which he understands fully and handles well. He has had problems with his health but these largely have been overcome and in the past 9 months have not impeded his operational usefulness. As of the date of this fitness report, he appears fully capable of handling any CI or FI operation assigned to him.</p>			
DATE	23 March 65	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
		C WH/SA CI (WH/C/SP)	Harold F. Swenson

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				027630	
SECTION A		GENERAL			
1. NAME (Last) (First) (Middle) [REDACTED]		2. DATE OF BIRTH 27 May 1919	3. SEX Male	4. GRADE GS-11	5. SD D
6. OFFICIAL POSITION TITLE OPS OFFICER		7. OFF/DIV/BR OF ASSIGNMENT IDP/S.1.S.		8. CURRENT STATION JMWAVE	
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT			
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify)		<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input checked="" type="checkbox"/> SPECIAL (Specify): Promotion			
11. DATE REPORT DUE IN O.P.		12. REPORTING PERIOD (From - to) 6 May 1963 to 5 September 1963			
SECTION B		PERFORMANCE EVALUATION			
W - Weak A - Adequate P - Proficient S - Strong O - Outstanding		Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C. Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence. Performance is more than satisfactory. Desired results are being produced in a proficient manner. Performance is characterized by exceptional proficiency. Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.			
SPECIFIC DUTIES					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 To effect security screenings of PBRUMEN refugees arriving in the JMWAVE area from PBRUMEN in joint collaboration with ODENVY representatives.					RATING LETTER S
SPECIFIC DUTY NO. 2 To interrogate PBRUMEN security suspects, surfaced by the above screenings and other means, in conjunction with representatives of the KUJUMP interrogation center [REDACTED]					RATING LETTER S
SPECIFIC DUTY NO. 3 To supervise the interrogation efforts of three KUJUMP interrogators connected with the JMWAVE/KUJUMP KUDESK debriefing program.					RATING LETTER P
SPECIFIC DUTY NO. 4 To prepare and present to his immediate supervisor completed interrogation reports.					RATING LETTER P
SPECIFIC DUTY NO. 5					RATING LETTER
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance. 27 SEP 1963					RATING LETTER S

SECRET

(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for promotion. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p>			
<p>The person being rated is a conscientious devoted ^{SEP 26 2 07 PM '63} 2 07 PM '63 ^{NAUROS} who has demonstrated an extraordinary ability to get along with his co-workers and other ODOKE representatives with whom he is collaborating. He receives his assignments cheerfully and with enthusiasm and approaches all of his tasks with great zeal. He devotes an inordinate amount of his own personal time to his duties in an effort to achieve perfection and sets very high standards for his own performance. The person being rated speaks native Spanish and is able to accomplish all of his interrogations in Spanish. This ability is a great asset to him in his work and redounds in benefits to the KUDESK effort of the Station.</p> <p>The person being rated is an accomplished interrogator and thus receives very little guidance in his work. His ability to trap security suspects in contradictions is unique and is paying dividends in the WAVE KUDESK field of endeavor. He has shown mature judgment in the handling of complex security cases, balance in appraising the interrogation results and in recommending disposal action, and proficiency in the preparation of his interrogation reports. He is currently supervising the interrogation activities of three KUJUMP interrogators and and has shown an ability in establishing personal rapport with these interrogators and proficiency in directing their activities. It is recommended from the standpoint of his career development that after the completion of his current assignment, the person being rated be moved into an assignment involving the handling of agents in the KUDESK field of effort.</p>			
SECTION D CERTIFICATION AND COMMENTS			
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
4 months	At time preparation this report employee was on TDY Hqs and leave. Will be shown him upon return.		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
4 September 1963	Chief, CI Branch, JMWAVE	/s/ Neil T. PICKWORTH (signed in pseudo on Fld. Trans.)	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>Subject is a hard working, dedicated, productive intelligence officer who has completely mastered those basic tools of the trade which are needed in CI activities. Subject has and uses native Spanish language fluency. Subject's performance during the period covered by this fitness report warrants an overall evaluation of "Strong." As a result, it is believed that Subject is a well-qualified journeyman who has earned a promotion to the grade of GS-12. Subject is strongly recommended for promotion to the grade of GS-12. Subject has additional growth potential as an intelligence officer. Subject's activities come to the attention of the Reviewing Officer on a bi-weekly basis.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
18 September 1963	Chief of Station, JMWAVE	/s/ Andrew K. REUTEMAN (signed in pseudo on Fld. Trans.)	

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
<div style="display: flex; justify-content: space-between;"> <div> SECTION A 1. NAME (Last) (First) (Middle) HIDALGO, BALMES </div> <div> 2. DATE OF BIRTH 27 May 1919 </div> <div> 3. SEX M </div> <div> 4. GRADE GS-11 </div> <div> 5. SD D </div> </div>				027630	
6. OFFICIAL POSITION TITLE Ops Officer				7. OFF/DIV/BR OF ASSIGNMENT DDP WH P&O SEC A.	
8. CHECK (X) TYPE OF APPOINTMENT <input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See instructions - Section C)				10. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE	
9. SPECIAL (Specify):				11. DATE REPORT DUE IN O.P. 30 October 1962	
12. REPORTING PERIOD (From - to) 17 Jan 62 - 30 Sep 62				17 Jan 62 - 30 Sep 62	
SECTION B PERFORMANCE EVALUATION					
<p>W - <u>Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - <u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>O - <u>Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).</p>					
SPECIFIC DUTY NO. 1 Responsible for initiation and development of WH Division durable assets program.					RATING LETTER P
SPECIFIC DUTY NO. 2 Collate and maintain files on espionage laws of LA countries.					RATING LETTER P
SPECIFIC DUTY NO. 3 Served as interpreter and translator for Division LA contacts.					RATING LETTER P
SPECIFIC DUTY NO. 4 Coordinated with Branch 1 of WHD on FI and CI matters.					RATING LETTER P
SPECIFIC DUTY NO. 5 Gives lectures as guest instructor to students attending School of International Communism.					RATING LETTER S
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER P

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Mr. Hidalgo joined WH/PO/A in November 1961 and took up those responsibilities listed above. However, Mr. Hidalgo's performance of duties was interrupted on two occasions by serious illness, 9-27 March and 15 April-31 May 1962. He was twice hospitalized. From 25 June-9 August 1962, Mr. Hidalgo was on TDY for WH/3 as escort officer for Latin American trainees. Although beset by health and other personal problems, Mr. Hidalgo seized upon each new assignment with his customary energy. He proved particularly adept in working as interpreter and escort officer for Latin American trainees, and demonstrated high interest and proven competence in counterintelligence work. His excellent memory and quick perception were distinct assets in these undertakings.

It is recommended, however, that Mr. Hidalgo's next assignment not carry responsibility for submission of finished papers or staff studies, but be one entailing duties commensurate with his ability to work effectively with indigenous personnel and to pursue CI leads through records investigation.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 18 Sept 62	SIGNATURE OF EMPLOYEE <i>Adolfo L. Hidalgo</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 18 September 1962	OFFICIAL TITLE OF SUPERVISOR C/WH/PO/A	TYPED OR PRINTED NAME AND SIGNATURE <i>Clark H. Simmons</i> CLARK H. SIMMONS
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I have had insufficient personal contact with Subject to make any meaningful comments.		
DATE 13 September 1962	OFFICIAL TITLE OF REVIEWING OFFICIAL C/WH/OPS	TYPED OR PRINTED NAME AND SIGNATURE _____

SECRET

S E C R E T
(When Filled In)

CERTIFICATION OF SEPARATING EMPLOYEE

Name (Last-First-Middle)

Hidalgo, Balmeo

MEMORANDUM FOR THE RECORD - ATTACH TO OFFICIAL PERSONNEL FOLDER

I hereby acknowledge the receipt of the following forms and/or information concerning my separation from CIA as indicated by check mark:

- | | |
|---|---|
| ✓ | 1. Standard Form 8 (Notice to Federal Employee about Unemployment Compensation). |
| ✓ | 2. Standard Form 55 (Notice of Conversion Privilege, Federal Employees' Group Life Insurance). <i>N.A.</i> |
| | 3. Standard Form 55 (Agency Certification of Insurance Status, Federal Employers' Group Life Insurance Act of 1954). |
| ✓ | 4. Standard Form 2802 (Application for Refund of Retirement Deductions).
<i>Medical Benefit</i> |
| ✓ | 5. Form 2535 (Authorization for Disposition of Paychecks).
<i>NO CHANGE</i> |
| | 6. Applicable to returnee (resignee from overseas assignment).
I have been advised of my right to have a medical examination before my separation from this Agency and of the importance of such a medical check to my health and well-being.
<input type="checkbox"/> Appointment arranged with Office of Medical Services.
<input type="checkbox"/> Appointment for Office of Medical Services examination declined. |
| | 7. I have been informed of "conflict of interests" policy of the Agency and foresee no problem in this regard concerning my new employment. |
| | 8. Form 71 (Application for Leave). |
| | 9. CSC Pamphlet 51 (Re-employment Rights of Federal Employees Performing Armed Forces Duty). |
| | 10. Instructions for returning to duty from Extended Leave or Active Military Service. |

Signature of Employee

[Signature]

Date Signed

Feb 27, 1970

Address (Street, City, State, Zip Code)

403 SILVER ROCK RD ROCKVILLE MD 20851

Correspondence

☒ Overt

☐ Covert

*IR 40 VERMILION HIDALGO
X6646*

S E C R E T

SECRET

**ELECTION, DECLINATION, OR WAIVER
OF LIFE INSURANCE COVERAGE**
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

**IMPORTANT
AGENCY INSTRUCTIONS
ON BACK OF ORIGINAL**

TO COMPLETE THIS FORM—

1 FOLLOW THESE GENERAL INSTRUCTIONS:

- Read the back of the "Duplicate" carefully before you fill in the form.
- Fill in BOTH COPIES of the form. Type or use ink.
- Do not detach any part.

2 FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):

NAME (last)	(first)	(middle)	DATE OF BIRTH (month, day, year)	SOCIAL SECURITY NUMBER
NEALGO Jr	Belmes	Nieves	May 27 1919	123 05 9966
Employee Serial Number 27630			LOCATION (City, State, ZIP Code)	
EMPLOYING DEPARTMENT OR AGENCY				

3 MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):

Mark here
if you
WANT BOTH
optional and
regular
insurance



ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE

I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here
if you
DO NOT WANT
OPTIONAL but
do want
regular
insurance



DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE

I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here
if you
WANT NEITHER
regular nor
optional
insurance



WAIVER OF LIFE INSURANCE COVERAGE

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

**4 SIGN AND DATE IF YOU MARKED BOX "A" OR "C".
COMPLETE THE "STATISTICAL STUB." THEN RETURN
THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.**

SIGNATURE (do not print)

DATE

13 February 1963

FOR EMPLOYING OFFICE USE ONLY

(Official receiving date stamp)

OFFICE OF PERSONNEL
FEB 20 3 30 PM '68

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

SECRET

STANDARD FORM NO. 176-7
JANUARY 1958
(for use only until April 14, 1968)
176-101

APPOINTMENT AFFIDAVITS

IMPORTANT.—Before swearing to these appointment affidavits, you should read and understand the attached information for appointee.

CENTRAL INTELLIGENCE AGENCY

WASHINGTON, D.C.

(Department or agency)

(Bureau or division)

(Place of employment)

I, BALMES HIDALGO JR., do solemnly swear (or affirm) that—

A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, SO HELP ME GOD.

B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I knowingly a member of any organization that advocates the overthrow of the constitutional form of the Government of the United States, or which seeks by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) that I will not so advocate, nor will I knowingly become a member of such organization during the period that I am an employee of the Federal Government or any agency thereof.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not participating in any strike against the Government of the United States or any agency thereof, and I will not so participate while an employee of the Government of the United States or any agency thereof. I do not and will not assert the right to strike against the Government of the United States or any agency thereof while an employee of the Government of the United States or any agency thereof. I do further swear (or affirm) that I am not knowingly a member of an organization of Government employees that asserts the right to strike against the Government of the United States or any agency thereof and I will not, while an employee of the Government of the United States or any agency thereof, knowingly become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not, nor has anyone acting in my behalf, given, transferred, promised or paid any consideration for or in expectation or hope of receiving assistance in securing such appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

17 Mar 58

(Date of entrance on duty)

Balme Hidalgo Jr.
(Signature of appointee)

Subscribed and sworn before me this 13th day of March, A. D. 1958.

at Washington,
(City)

D.C.
(State)

[SEAL]

Billy A. Bussard 17 MAR 1958
(Signature of officer)
Appointment Clerk
(Title)

NOTE.—If the oath is taken before a Notary Public the date of expiration of his commission should be shown.

DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Answer all questions. Admitted unfavorable information about such matters as arrests or discharges will be considered together with the favorable information in your record in determining your present fitness for Federal employment. However, a false statement or dishonest answer to any question may be grounds for dismissal after appointment and is punishable by law.

1. PRESENT ADDRESS (street and number, city and State)
7615 B. T. McMillan Blvd., N.W. - Wash. 16, D. C.

2. (A) DATE OF BIRTH 27 May 1919 (B) PLACE OF BIRTH (city and State or city and foreign country)
Hammond, Indiana

3. (A) IN CASE OF EMERGENCY, PLEASE NOTIFY Louise Hunsicker (B) RELATIONSHIP wife (C) STREET AND NUMBER, CITY AND STATE _____ (D) TELEPHONE NO. _____

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? ☐ YES ☒ NO
 If so, for each such relative fill in the blank below. If additional space is necessary, complete under Item 12.

NAME	POST OFFICE ADDRESS (Give street number, if any)	(1) POSITIVE OR (2) TEMPORARY OR NOT (1) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATIONSHIP	MAR. RHD (Last 8 days)	SIN. GLE (Last 8 days)

INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO
5. (A) ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA, OR (B) AS A NATIVE OF AMERICAN SAMOA DO YOU OBE ALLEGIANCE TO THE UNITED STATES OF AMERICA?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	10. (A) HAVE YOU EVER FILED A WAIVER OF LIFE INSURANCE COVERAGE UNDER THE FEDERAL EMPLOYEES' GROUP LIFE INSURANCE ACT?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(B) IF YOU HAVE FILED SUCH A WAIVER, HAS IT BEEN CANCELED OR REVOKED?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If your answer is "Yes," give details in Item 12.			11. (A) HAVE YOU BEEN DISCHARGED FROM EMPLOYMENT BECAUSE:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. DO YOU RECEIVE OR HAVE YOU APPLIED FOR AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(1) YOUR CONDUCT WAS NOT SATISFACTORY?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If your answer is "Yes," give details in Item 12.			(2) YOUR WORK WAS NOT SATISFACTORY?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. SINCE YOU FILED APPLICATION RELATING TO THIS APPOINTMENT HAVE YOU BEEN ARRESTED, CHARGED, OR HELD BY FEDERAL, STATE, OR OTHER LAW ENFORCEMENT AUTHORITIES FOR ANY VIOLATION OF ANY FEDERAL LAW, STATE LAW, COUNTY OR MUNICIPAL LAW, REGULATION OR ORDINANCE? DO NOT INCLUDE TRAFFIC VIOLATIONS FOR WHICH A FINE OF \$10 OR LESS WAS IMPOSED. ALL OTHER CHARGES MUST BE INCLUDED EVEN IF THEY WERE DISMISSED.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B. HAVE YOU RESIGNED AFTER OFFICIAL NOTIFICATION THAT:	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If your answer is "Yes," give in Item 12 for each case: (1) approximate date, (2) charge, (3) place, (4) action taken.			(1) YOUR CONDUCT WAS NOT SATISFACTORY?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
9. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT HAVE YOU BEEN BARRED BY THE U. S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR ACCEPTING CIVIL SERVICE APPOINTMENTS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	(2) YOUR WORK WAS NOT SATISFACTORY?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If your answer is "Yes," give dates of and reasons for such debarment in Item 12.			C. HAVE YOU BEEN DISCHARGED FROM THE ARMED SERVICES UNDER OTHER THAN HONORABLE CONDITIONS?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			If your answer to A, B, or C is "Yes," give details in Item 12 as fully as you can remember, including the name and address of employer, approximate date, and reasons in each case.		

12. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply.)

ITEM NO.	ANSWER	ITEM NO.	ANSWER

INSTRUCTIONS TO APPOINTING OFFICER—You must determine that this appointment would be in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations, and acts of Congress pertaining to appointment. This form should be checked for holding of office, pension, any record of recent discharge or arrest, age, citizenship, and members of family. Also, to establish the identity of the appointee, you should particularly check (1) his signature and handwriting against the application and/or other pertinent papers and (2) his physical appearance against the medical certificate.

SECRET
(When Filled In)

16

QUALIFICATIONS UPDATE							
READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS							
<p>Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information, however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 441, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13, Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.</p>							
SECTION I BIOGRAPHIC AND POSITION DATA							
EMP. SER. NO.	NAME (Last-First-Middle)				DATE OF BIRTH		
027630	Hidalgo, Balmes N. Jr.				05/27/19		
SECTION II EDUCATION							
HIGH SCHOOL							
LAST HIGH SCHOOL ATTENDED		ADDRESS (City State Country)		YEARS ATTENDED (From To)		GRADUATE	
La Salle Academy		NYC NY		1938-1940		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE OR UNIVERSITY STUDY							
NAME AND LOCATION OF COLLEGE OR UNIVERSITY		SUBJECT		YEARS ATTENDED FROM-TO	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/OTR. HRS. (Specify)
		MAJOR MINOR					
1. NY University		Comm Law		1943-45	NO		
UNIV of MD		Fire engineering		1968	No Credit Course		
2. Mont Jr College		Real Estate Procedures		1968	No Credit Course		
IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.							
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
Suburban Hospital		Emergency Room procedures		1968		3(7)	
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1. Non-Con leadership school				1947		?	
SECTION III MARITAL STATUS							
1. PRESENT STATUS (Single Married, Widowed, Separated, Divorced, Annulled, Remarried) SPECIFY: MARRIED							
2. NAME OF SPOUSE		(Last)	(First)	(Middle)	(maiden)		
		HIDALGO	Veronica	Waylonia	Waylonia		
3. DATE OF BIRTH		4. PLACE OF BIRTH (City State Country)					
23 May 14		DuBois, Pa, USA					
5. OCCUPATION		6. PRESENT EMPLOYER					
Train Asst		CIA					
7. CITIZENSHIP		8. FORMER CITIZENSHIP(S) COUNTRY(IES)				9. DATE U.S. CITIZENSHIP ACQUIRED	
US		N/A				Birth	
SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE							
NAME		RELATIONSHIP	DATE AND PLACE OF BIRTH		CITIZENSHIP	PERMANENT ADDRESS	
1. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE		Daughter	1945 NY NY		US	Arlington, Va	
2. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE		Daughter	1950 NYC NY		US	Alexandria Va	
		Mother	1892 SECRET SPAIN		US	Rockville MD	

FORM 444a

ADD

Mother

1892 SECRET SPAIN

US

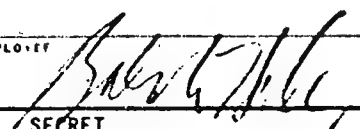
Rockville MD

(16-511)

(H) 301.001

SECRET

(When Filled In)

SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF ENTRY	KNOWLEDGE ACQUIRED BY... CHECK (X)			
				RECEIVED	TRAVEL	STUDY	OTHER
Havana Cuba	Language, customs, people	1919-25		X			X
Rep of Panama	"	1952-58	Dec 20	X	X		X
El Salvador, Mexico	"	various		X	X		X
Guatemala, Puerto Rico	"	various		X	X		X
SECTION VI Hawaii	TYPING AND STENOGRAPHIC SKILLS						
1. TYPING (PPH) 2. SHORTHAND (PPH)		3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM					
		<input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOGRAPH <input type="checkbox"/> OTHER SPECIFY:					
SECTION VII SPECIAL QUALIFICATIONS							
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED							
Extremely capable in First Aid (advanced) and teaching of same. Firefighting procedures. Elementary knowledge of Real Estate Procedures.							
SECTION VIII MILITARY SERVICE							
CURRENT DRAFT STATUS							
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?				2. NEW CLASSIFICATION			
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				N/A			
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS				4. IF DEFERRED, GIVE REASON			
N/A				N/A			
MILITARY RESERVE, NATIONAL GUARD STATUS							
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG				<input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD			
NONE							
1. CURRENT RANK, GRADE OR RATE		2. DATE OF APPOINTMENT IN CURRENT RANK		3. EXPIRATION DATE OF CURRENT OBLIGATION			
N/A		N/A		N/A			
4. CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input checked="" type="checkbox"/> DISCHARGED							
5. MILITARY MOBILIZATION N/A				6. RESERVE UNIT TO WHICH N/A ASSIGNED OR ATTACHED			
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		DATE COMPLETED			
Non-Com leadership school		same		7777			
						PRESIDENT	
						AGENCY-SPONSORED	
SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS							
NAME AND CHAPTER		ADDRESS (Number, Street, City, State, Country)			DATE OF MEMBERSHIP		
					FROM TO		
American Red Cross		Silver Spring Md			1964 present		
Rockville Fire Dept and OTHERS		(presently Rockville, Md)			1958 present		
International Rescue & 1st Aid Assoc		worldwide			1956(?) present		
Montgomery Board of Realtors (ASSOCIATE member) (Permanent pending)					1958 present		
3.							
SECTION X REMARKS							
I am a bit hazy on the dates.							
DATE		SIGNATURE OF EMPLOYEE					
19 Dec 68							

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FORM 10-60 (Rev. 1-60)

SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY--CHECK IN:			
				RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT
Cuba	Area and people/Lan.	1919-1924	Family	X		X	X
Panama	Area and people/Lan	1952-58	XXXX	X	X	X	X
Dom Rep	Area and People/Lan	1965			X		X
Salvador & Guat	" "	1961-2-3			X		X

SECTION VI & Mexi TYPING AND STENOGRAPHIC SKILLS

1. TYPING (PPV) 2. SHORTHAND (BFW) 3. INDICATE SHORTHAND SYSTEM USED--CHECK IN: APPROPRIATE ITEM

☐ CREGG ☐ SPEEDWRITING ☐ STENO TYPE ☐ OTHER SPECIFY:

SECTION VII SPECIAL QUALIFICATIONS

PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED

Quite proficient in photography - Safety and Fire engineering - First Aid including the Instruction of First Aid & Hospital Coppenman duties. SOME Real Estate knowledge.

SECTION VIII MILITARY SERVICE

CURRENT DRAFT STATUS

1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED? ☐ YES ☐ NO 2. NEW CLASSIFICATION: See age.

3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS 4. IF DEFERRED, GIVE REASON

MILITARY RESERVE, NATIONAL GUARD STATUS

CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG: ☐ ARMY ☐ MARINE CORPS ☐ COAST GUARD ☐ NATIONAL GUARD ☐ NAVY ☐ AIR FORCE ☐ AIR NATIONAL GUARD

1. CURRENT RANK, GRADE OR RATE: N/A 2. DATE OF APPOINTMENT IN CURRENT RANK: N/A 3. EXPIRATION DATE OF CURRENT OBLIGATION: N/A

4. CHECK CURRENT RESERVE CATEGORY: ☐ READY RESERVE ☐ STANDBY (active) ☐ STANDBY (inactive) ☐ RETIRED ☒ DISCHARGED

5. MILITARY MOBILIZATION ASSIGNMENT: N/A 6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED: N/A

MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	DATE COMPLETED	REASON FOR LEAVING
Non-Com leadership school	Infantry	1943	N/A

SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS

NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP	
		FROM	TO
Rockville Fire Dept & others	Rockville Md & others	1958	present
Red Cross as Emergency transport and First Aid Instructor as well as Md Coppenman		1964	"
Associate member Mont Realtors		1968	"
Int Assoc Rescue & First Aid		1964	"

SECTION X REMARKS

Re Section IV: Both daughters now married.
 Re Section III: This is second marriage.
 Re Real Estate training: This still in active stage. Plans are to supplement my work and eventually change to it on full time basis.

DATE: 25 Nov 68 SIGNATURE OF EMPLOYEE: [Signature]

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QUALIFICATIONS UPDATE

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT, AVOID USING LIGHT COLORED INKS

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 441, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I BIOGRAPHIC AND POSITION DATA									
EMP. SER. NO. 027630		NAME (Last-First-Middle) Hidalgo, Balmes N.				DATE OF BIRTH 05/27/19			
SECTION II EDUCATION									
HIGH SCHOOL									
LAST HIGH SCHOOL ATTENDED La Salle Academy			ADDRESS (City, State, Country) NY City NY			YEARS ATTENDED (From-To) 1938-40		GRADUATE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE OR UNIVERSITY STUDY									
NAME AND LOCATION OF COLLEGE OR UNIVERSITY				SUBJECT		YEARS ATTENDED FROM-TO		DEGREE RECEIVED	
				MAJOR MINOR				YEAR RECEIVED	
1. New York University				Comm Law Import-Export procedures		1943/45		NO	
2.									
IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.									
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS									
NAME AND ADDRESS OF SCHOOL			STUDY OR SPECIALIZATION			FROM		TO	
						NO. OF MONTHS			
University of Md. College of Engineering			Fire Service extension			Jan 66		Aug 66	
						8			
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE									
NAME AND ADDRESS OF SCHOOL			STUDY OR SPECIALIZATION			FROM		TO	
						NO. OF MONTHS			
1. Montgomery Junior College Rockville, Md Campus			Real Estate procedures			Oct 1968		1	
2. Suburban Hospital Bethesda, Md			Emergency Medical Aid/ Maryland State Corpman			Jan-May 1968		5	
SECTION III MARITAL STATUS									
1. PRESENT STATUS (Single Married Widowed Separated Divorced Annulled Remarried) SPECIFY: Married									
2. NAME OF SPOUSE (Last) (First) (Middle) (maiden) HIDALGO Veronica W. (WAYLONIS)									
3. DATE OF BIRTH May 29 1914			4. PLACE OF BIRTH (City, State, Country) DuBois, Pa., USA						
5. OCCUPATION Admin Asst			6. PRESENT EMPLOYER C.I.A.						
7. CITIZENSHIP US			8. FORMER CITIZENSHIP(S) COUNTRY(IES) N/A				9. DATE U.S. CITIZENSHIP ACQUIRED Birth		
SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE									
NAME		RELATIONSHIP		DATE AND PLACE OF BIRTH		CITIZENSHIP		PERMANENT ADDRESS	
1. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE		Daughter		NYC NY - Feb 23/50		US		Alexandria Va	
2. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE		Daughter		NYC NY - Jan 6/45		US		Arlington Va	

FORM 444n
2-68

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ALSO FIRST AID INSTRUCTIONS cover of form 7-44/60

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QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS.

SECTION I

BIOGRAPHIC AND POSITION DATA

1 EMP SER NO 027530	2 NAME (Last First Middle) MICALGO B N JR	3 SEX M	4 DATE OF BIRTH 09/27/19	5 SCHEDULE GRADE/STEP GS-12-04
6 SSN J	7 POSITION TITLE CPS OFFICER	8 OFFICE OF ASSIGNMENT AM	9 LOCATION (Country, City) WASH., D.C.	

SECTION II

AGENCY OVERSEAS SERVICE

AREA	TYPE TOUR	FROM	TO
WESTERN HEMISPHERE	PCS-VV	52/05/12	57/12/50
WESTERN HEMISPHERE	TDY-CC	59/01/29	59/02/08
WESTERN HEMISPHERE	TDY-CC	61/02/01	61/03/01
WESTERN HEMISPHERE	TDY-CC	61/04/19	61/06/19
EUROPEAN AREA	TDY-CC	63/12/01	63/12/18
WESTERN HEMISPHERE	PCS-CC	68/04/01	68/05/01
		63/04/01	64/04/01
WESTERN HEMISPHERE	TDY-CC	65/11/11	65/11/11
		THIRTEEN	13

OVERSEAS DATA

CODED 25 APR 1968

DATE: INITIALS:

SECTION III

EDUCATION

DEGREE	MAJOR FIELD	COLLEGE	YEAR
NONE	NO COLLEGE DEGREE ON RECORD		
	TWO YEARS - COMMERCIAL LHM IMPART EXPORT PROGRESS	NYU	1943-45

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SECTION III							
EDUCATION (Cont'd)							
HIGH SCHOOL							
LAST HIGH SCHOOL ATTENDED		ADDRESS City, State, Country		YEARS ATTENDED From To		GRADUATE	
La Salle Academy		NYC NY		1938-40		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE OR UNIVERSITY STUDY							
NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM TO	DEGREE RECEIVED	YEAR RECEIVED	NO SEM / QTR	
	MAJOR	MINOR				HRS. Spent	
1 NYU - NYC NY	Comm. Law	Export laws	Sept 43 to ? 45	No		???	
2							
3							
4							
5 IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE, INDICATE SUBJECT, DATE OF A WRITTEN THESIS, AND DATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT							
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> 011112 011112 011112 </div>							
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO OF MONTHS	
1							
2							
3							
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO OF MONTHS	
1							
2							
3							
4							
5							
AGENCY-SPONSORED EDUCATION							
Specify which, if any, of the education shown in Section III was Agency sponsored							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO OF MONTHS	
1 Full Ops course					During 1958	9	
2 Management Course					1966 One Week		
3							
4							
5							

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SECTION VII MILITARY SERVICE			
CURRENT DRAFT STATUS			
1. ARE YOU REGISTERED FOR THE DRAFT		2. SELECTIVE SERVICE CLASSIFICATION	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		???	
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS		4. IF DEFERRED, GIVE REASON	
N/A		N/A	
MILITARY SERVICE RECORD (Active Duty Only)			
1. MILITARY ORGANIZATION (Army, Navy, etc.)	2. BRANCH OR CORPS	3. DATES OF SERVICE (extended active duty)	
Army	Infantry	FROM Oct 1940 TO Sept 1943	
4. STATUS (Regular, Reserve, etc.)	5. RANK, GRADE OR RATE (at separation, if not service)	6. SERIAL SERVICE OR FILE NUMBER	
Federalized National Guard	Cpl.	20249766	
7. CHECK TYPE OF SEPARATION			
<input checked="" type="checkbox"/> HONORABLE DISCHARGE <input type="checkbox"/> RELEASE TO INACTIVE DUTY <input type="checkbox"/> RETIREMENT FOR AGE <input type="checkbox"/> RETIREMENT FOR SERVICE <input type="checkbox"/> RETIREMENT FOR COMBAT DISABILITY <input checked="" type="checkbox"/> RETIREMENT FOR PHYSICAL DISABILITY <input type="checkbox"/> UNDUCE HARSHIPS <input type="checkbox"/> OTHER (Specify)			
8. BRIEF DESCRIPTION OF MILITARY DUTIES (Record the duties and status which best describe your work or function in the military service)			
Infantryman; Cryptographic sections; driver.			
MILITARY RESERVE, NATIONAL GUARD STATUS			
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG			
None			
<input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD			
1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT IN CURRENT RANK	3. EXPIRATION DATE OF CURRENT RESERVE OBLIGATION	
4. CHECK CURRENT RESERVE CATEGORY			
<input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (Active) <input type="checkbox"/> STANDBY (Inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED			
5. BRIEF DESCRIPTION OF MILITARY RESERVE DUTIES (Record the duties and status which best describe your work or function in the military service)			
6. IF YOU ARE CURRENTLY ASSIGNED TO A RESERVE OR NATIONAL GUARD TRAINING UNIT, IDENTIFY THE UNIT AND ITS ADDRESS			
MILITARY SCHOOLS COMPLETED (Active Duty, Reserve Status or as Civilian)			
NAME AND ADDRESS OF SCHOOL	FIELD OF SPECIALIZATION	DATE COMPLETED	
1.			<input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED
2.			<input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED
3.			<input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED
4.			<input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED
5.			<input type="checkbox"/> RESIDENT <input type="checkbox"/> CORRESPONDENCE <input type="checkbox"/> AGENCY SPONSORED

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SECTION IV GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATE OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY: CHECK IN			
				RES- DENCE	TRA- V- EL	STUDY	WORK ASSIGN- MENT
Cuba	Language-Area knowledge	1919-1924	---	X			
Panama	" " "	1952-58		X			X
Puerto Rico	" " "	various			X		X
Guatemala	" " "	various			X		X
El Salvador	" " "	various			X		X
Mexico	" " "	various			X		X
Dom Rep	" Limited area knowledge	1965					X
Germany	" " "	1963					X
Scotland	" " "	1963					X

SECTION V TYPING AND STENOGRAPHIC SKILLS			
1. TYPING (WPM) 40	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED - CHECK IN APPROPRIATE ITEM <input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOGRAPHY <input type="checkbox"/> OTHER SPECIFY	
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (comparator, mimeograph, card punch, etc.) Various			

SECTION VI SPECIAL QUALIFICATIONS	
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED. INDICATE YOUR PROFICIENCY IN EACH. First Aid Instructor. Very active currently. Fire Fighting and safety practices. University of Maryland. Active currently. <i>Shy, Diving - 10 fingers during 1962. Love swimming.</i>	
2. LIST ALL BUSINESS EQUIPMENT FOR WHICH YOU MAY HAVE LISTED IN ITEM 4. SPECIFICALLY, LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES, SUCH AS OPERATION OF RADIO TRANSMITTERS, adding, multiplying & recording, OFFSET PRESS, TURRET LATHE, ECP AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES	
3. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION SUCH AS PHOTO, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, PSYCHOLOGIST, PHYSICIAN, ETC? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
4. IF YOU HAVE ANSWERED "YES" TO ITEM 3 ABOVE, INDICATE KIND OF LICENSE OR CERTIFICATION AND THE ISSUING STATE, MUNICIPALITY, ETC. (Provide license registration number if known) First Aid Instructor - National Red Cross - 1963	5. FIRST LICENSE, CERTIFICATE (year of issue) 1963 6. LATEST LICENSE/CERTIFICATE (year of issue)
7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR. Do NOT submit unless requested. INDICATE THE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (non-fiction or scientific articles, general interest subjects, novels, short stories, etc.)	
8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED	
9. PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE	

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7.

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(When Filled In)

1. PERSONNEL SERIAL NO. (1-6)		LANGUAGE PROFICIENCY AND AWARDS DATA				2. L.D. NO.	
3. NAME (7-24)		4. COMPONENT		5. GRADE		6. DATE OF BIRTH	
7. LANGUAGE		8. CODE (25-27)		9. DATE OF TEST		10. ANNIVERSARY DATE (28-33)	
11. TEST PURPOSE		12. TEST SCORES				13. ELIGIBILITY (39)	
AWARD		READING (34)		WRITING (35)		PRONUNCIATION (36)	
SKILL		SPEAKING (37)		UNDERSTANDING (38)		AWARDABLE	
						NOT AWARDABLE	
14. I CERTIFY THIS EMPLOYEE FOR AWARD				15. TYPE OF AWARD			
SIGNATURE		DATE		A - M		E - I - M	
				C		R - W - B	
				D - V			
16. AMOUNT OF AWARD		\$		17. I CERTIFY THAT FUNDS ARE AVAILABLE			
18. FEDERAL TAX DEDUCTION		\$		OBLIGATION REF. NO.			
19. STATE/DC TAX DEDUCTION		\$		SIGNATURE			
20. NET AMOUNT OF AWARD		\$		20. CHANGE ALLOTMENT NO.			
21. FORWARD CHECK TO				DATE			
				22. EMPLOYEE PAYROLL NO.			
				24. ALLOTMENT OF ASSIGNMENT			
				25. CHECK NO.			
				DATE			

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1. PERSONNEL SERIAL NO. (1-6)		LANGUAGE PROFICIENCY AND AWARDS DATA				2. L.D. NO.	
3. NAME (7-24)		4. COMPONENT		5. GRADE		6. DATE OF BIRTH	
7. LANGUAGE		8. CODE (25-27)		9. DATE OF TEST		10. ANNIVERSARY DATE (28-33)	
11. TEST PURPOSE		12. TEST SCORES				13. ELIGIBILITY (39)	
AWARD		READING (34)		WRITING (35)		PRONUNCIATION (36)	
SKILL		SPEAKING (37)		UNDERSTANDING (38)		AWARDABLE	
						NOT AWARDABLE	
14. I CERTIFY THIS EMPLOYEE FOR AWARD				15. TYPE OF AWARD			
SIGNATURE		DATE		A - M		E - I - M	
				C		R - W - B	
				D - V			
16. AMOUNT OF AWARD		\$		17. I CERTIFY THAT FUNDS ARE AVAILABLE			
18. FEDERAL TAX DEDUCTION		\$		OBLIGATION REF. NO.			
19. STATE/DC TAX DEDUCTION		\$		SIGNATURE			
20. NET AMOUNT OF AWARD		\$		20. CHANGE ALLOTMENT NO.			
21. FORWARD CHECK TO				DATE			
				22. EMPLOYEE PAYROLL NO.			
				24. ALLOTMENT OF ASSIGNMENT			
				25. CHECK NO.			
				DATE			

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(11-8)		LANGUAGE DATA RECORD		
127 630				
PART I-GENERAL				
1. NAME (Last-First-Middle)		2. DATE OF BIRTH		
Hidalgo, Palmes Nieves JR		MONTH DAY YEAR May 27 1910		
3. LANGUAGE		4. TODAY'S DATE		
Spanish 720		MONTH DAY YEAR May 9 1958		
<input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE				
PART II-LANGUAGE ELEMENTS				
SECTION A. Reading (40)				
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.				
2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.				
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.				
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.				
5. I HAVE NO READING ABILITY IN THE LANGUAGE.				
SECTION B. Writing (41)				
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.				
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.				
3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.				
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.				
5. I CANNOT WRITE IN THE LANGUAGE.				
SECTION C. Pronunciation (42)				
1. MY PRONUNCIATION IS NATIVE.				
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.				
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.				
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.				
5. I HAVE NO SKILL IN PRONUNCIATION.				
CONTINUE ON REVERSE SIDE				

CONTINUATION OF PART II—LANGUAGE ELEMENTS	
SECTION D. Speaking (43)	
1.	I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2.	I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
3.	I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
4.	I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
5.	I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.
SECTION E. Understanding (14)	
1.	I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
2.	I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOKES AND PUNS.
3.	I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
4.	I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
5.	I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.
BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.	
PART III—EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)	
1.	I HAVE HAD EXPERIENCE AS A TRANSLATOR.
2.	I HAVE HAD EXPERIENCE AS AN INTERPRETER.
3.	BOTH OF THE ABOVE STATEMENTS APPLY.
4.	NONE OF THE ABOVE STATEMENTS APPLY.
PART IV—CERTIFICATION	
<p>I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 29-115, PAR. 1C(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.</p>	
DATE SIGNED <div style="font-family: cursive; font-size: 1.2em;">9 May 1958</div>	SIGNATURE <div style="font-family: cursive; font-size: 1.2em;">Halmy L. Hildesley</div>
(46) C	(47) A

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(When Filled In)

127630		LANGUAGE DATA RECORD	
PART I-GENERAL			
1. NAME (Last-First-Middle) (17-24)		2. DATE OF BIRTH (25-30)	
Hidalgo, Balboa Nieves JR		MONTH May	DAY 27
3. LANGUAGE (31-33)		4. TODAY'S DATE (34-39)	
Portuguese 630		MONTH May	DAY 9
		YEAR 1958	5. <input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE
PART II-LANGUAGE ELEMENTS			
SECTION A. Reading (40)			
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.			
2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.			
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.			
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.			
5. I HAVE NO READING ABILITY IN THE LANGUAGE.			
SECTION B. Writing (41)			
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.			
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.			
3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.			
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.			
5. I CANNOT WRITE IN THE LANGUAGE.			
SECTION C. Pronunciation (42)			
1. MY PRONUNCIATION IS NATIVE.			
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.			
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.			
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.			
5. I HAVE NO SKILL IN PRONUNCIATION.			
CONTINUE ON REVERSE SIDE			

CONTINUATION OF PART II--LANGUAGE ELEMENTS	
SECTION D. Speaking (43)	
1.	I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2.	I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
3.	I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
4.	I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
5.	I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.
SECTION E. Understanding (44)	
1.	I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
2.	I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOES AND PUNS.
3.	I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
4.	I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
5.	I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.
BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.	
PART III--EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)	
1.	I HAVE HAD EXPERIENCE AS A TRANSLATOR.
2.	I HAVE HAD EXPERIENCE AS AN INTERPRETER.
3.	BOTH OF THE ABOVE STATEMENTS APPLY.
4.	NONE OF THE ABOVE STATEMENTS APPLY.
PART IV--CERTIFICATION	
<p>I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 25-115, PAR. 1(C)(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.</p>	
DATE SIGNED	SIGNATURE
9 May 1958	J. Salas, J. Delacruz
(46)	(47)

CONFIDENTIAL

SECURITY APPROVAL

DATE : 17 April 1964

YOUR
REFERENCE: 18658 DDP/SAS

CASE NO. : 65077

TO : Director of Personnel

ATTN :

SUBJECT : HIDALGO, Balnes Nieves, Jr.

1. This is to inform you that Subject has been approved for the appointment specified in your request under the provisions of Headquarters Regulations 10-3 and 20-5 including access to classified information through TOP SECRET as required in the performance of duties.
2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.
3. As part of the entrance on duty processing:

☐ A personal interview in the Office of Security must be arranged.

☒ A personal interview is not necessary.

☐ Please advise Chief, Clearance Branch, extension 5620 when Subject enters on duty.

4. This is a conversion case.

FOR THE DIRECTOR OF SECURITY:

W. A. Osborne

W. A. Osborne

Chief, Personnel Security Division

CONFIDENTIAL
(When Filled In)

STAFF AGENT CLEARANCE

DATE : 22 April 1963

YOUR REFERENCE: Memorandum of 19 April 1963

CASE NO. : #65077

TO : Chief, Contract Personnel Division

ATTN. : Staff Agents Branch

SUBJECT : ~~REDACTED~~ Hedwige B. N. Jr.

1. This is to advise that a security clearance is granted for the employment of the Subject as a Staff Agent, OS-11, by DDP/SAS in the capacity of Operations Officer under Project JMWAVE.

2. If your office should desire at a later date to change the status or use of the Subject, a request to cover any proposed change should be submitted to this office.

3. Unless arrangements are made within 60 days for entrance on duty within 120 days, this Approval becomes invalid.

4. As a part of entrance on duty processing:

☐ A personal interview in the Office of Security must be arranged by your office.

☒ A personal interview is not necessary.

☐

W. A. Osborne

W. A. Osborne

CHIEF, PERSONNEL SECURITY DIVISION OS

CONFIDENTIAL
(WHEN FILLED IN)

SECURITY APPROVAL

DATE : 10 March 1958

**YOUR
REFERENCE:**

CASE NO. : 65077

TO : Director of Personnel

FROM : Director of Security

SUBJECT : HIDALGO, Balnes Nieves

1. This is to inform you of security approval of the subject person as follows:

- ☒ Subject has been approved for the appointment specified in your request under the provisions of Regulations 10-210 and 20-730 including access to classified information through Top Secret as required in the performance of his duties.
- ☐ Subject has been approved for appointment under the authority of Paragraph 4(d) of Regulation 10-210, and under Regulation 20-730 including access to classified information through Top Secret as required in the performance of his duties.

2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.

3. As part of the entrance on duty processing:

- ☒ A personal interview in the Office of Security must be arranged.
- ☐ A personal interview is not necessary.
- ☒ This clearance is issued in advance of receipt of a SF-377. Subject will be assigned to the WH Division.

FOR THE DIRECTOR OF SECURITY:

W. M. Knott
W. M. Knott
Chief, Personnel Security Division

SECRET

BIOGRAPHIC INFORMATION

Name: Raimon E. HIDALGO, Jr.
Grade: GS-11
Service Designation: DI

Date and Place of Birth: 27 May 1919
Havana, Cuba

Marital Status: Married

Education and Career Outside the Agency: 1945-46 New York University - No degree (2 yrs)
Nov 45-Dec 49 FBI, Eastern part of United States -
Undercover Agent

Languages: Spanish - Fluent
Portuguese & French - Fair

Military Duty: 27 Mar 39-27 Sep 1943 New York National Guard
(Federalized Oct 40) U.S. Army

CIA Experience: 18 Feb 52 Ex Appt., Contract Employee, GS-9, DDP/WH/
HYPOTHESIS,
1 Feb 56 Promotion, Contract Employee, GS-11, DDP/WH,
HYPOTHESIS,

CIA Training: Covert training

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(When Filled In)

<small>INSTRUCTIONS: COMPLETE IN DUPLICATE. THE DATE RECORDED ON THIS FORM IS ESSENTIAL IN DETERMINING TRAVEL EXPENSES ALLOWABLE IN CONNECTION WITH LEAVE AT GOVERNMENT EXPENSE, OVERSEAS DUTY, RETURN TO RESIDENCE UPON SEPARATION, AND FOR PROVIDING CURRENT RESIDENCE AND DEPENDENCY INFORMATION REQUIRED IN THE EVENT OF AN EMPLOYEE EMERGENCY. THE ORIGINAL OF THIS FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.</small>			
1. NAME OF EMPLOYEE <div style="display: flex; justify-content: space-between;"> (Last) HIDALGO JR (First) BALMES (Middle) NIEVES </div>			
RESIDENCE DATA			
PLACE OF RESIDENCE WHEN APPOINTED D.C.		LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)	
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE D.C.			
2. MARITAL STATUS			
CHECK (X) ONE: <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED			
IF MARRIED, INDICATE PLACE OF MARRIAGE BELEZONI MISS. USA		DATE OF MARRIAGE 9 APR 1943	
IF DIVORCED, PLACE OF DIVORCE DECREE		DATE OF DECREE	
IF WIDOWED, INDICATE PLACE SPOUSE DIED		DATE SPOUSE DIED	
IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE REASON(S) FOR TERMINATION, AND DATE(S)			
3. MEMBERS OF FAMILY			
NAME OF SPOUSE LOUISE HIDALGO		ADDRESS (No., Street, City, Zone, State)	
TELEPHONE NUMBER			
NAMES OF CHILDREN LUZ MARIA FRANCES REBECCA		ADDRESS	
SEX F		AGE 13	
SEX F		AGE 9	
NAME OF FATHER (Or male guardian) BALMES N HIDALGO		ADDRESS	
TELEPHONE NUMBER			
NAME OF MOTHER (Or female guardian) RESE HIDALGO		ADDRESS	
TELEPHONE NUMBER			
WHAT MEMBER(S) OF YOUR FAMILY HAS BEEN TOLD OF YOUR AFFILIATION WITH THE AGENCY FOR EMERGENCY PURPOSES? WIFE			
4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY			
NAME (Mr, Mrs, Miss) (Last-First-Middle) HIDALGO, LOUISE		RELATIONSHIP WIFE	
HOME ADDRESS (No., Street, City, Zone, State)		HOME TELEPHONE NUMBER	
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE		BUSINESS TELEPHONE & EXTENSION	
IS THE INDIVIDUAL NAMED ABOVE SITTING OF YOUR AGENCY AFFILIATION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
THE PERSONS NAMED IN ITEM 3 ABOVE MAY ALSO BE NOTIFIED IN CASE OF EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 7 ON THE REVERSE SIDE OF THIS FORM.			
5. VOLUNTARY ENTRIES			
INDICATE ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS GREENWICH SAVINGS BANK			
CONTINUED ON REVERSE SIDE			
CURRENT RESIDENCE AND DEPENDENCY REPORT			

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(When Filled In)

5. (CONTINUED)		
IN WHOSE NAME(S) ARE THE ACCOUNTS LISTED?		
JAMES W. HIGHLANDER 7/12 10:30 11/11/60		
HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES", WHERE IS DOCUMENT LOCATED?		
HAVE YOU EXECUTED A POWER OF ATTORNEY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES", WHO POSSESSES THE POWER OF ATTORNEY?		
6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS		
Do NOT NOTIFY OTHER PERSONS IN ITEM 3 OF EMERGENCY. <u>UNLESS</u> WIFE IS NOT AVAILABLE.		
SIGNED AT	DATE	SIGNATURE
		<i>James W. Highlander</i>

CONFIDENTIAL

70-0040-1

**PART III.—DETERMINING CREDITABLE SERVICE
AND SERVICE COMPUTATION DATE FOR
LEAVE PURPOSES**

TOTAL SERVICE (Item 12)

NONCREDITABLE SERVICE (Item 13)

CREDITABLE SERVICE (Leave purposes)

ENTRANCE ON DUTY DATE (Present agency)

LESS CREDITABLE SERVICE (Leave purposes)

SERVICE COMPUTATION DATE (Leave purposes)

YEARS	MONTHS	DAYS

58	3	17
11	8	1
46	7	16

**PART IV.—DETERMINING CREDITABLE SERVICE
AND SERVICE COMPUTATION DATE FOR
REDUCTION IN FORCE PURPOSES**

(To be completed only in those cases when the amount of creditable service for reduction
in force purposes differs from the amount creditable for leave purposes)

TOTAL SERVICE (Item 12)

NONCREDITABLE SERVICE (Item 14)

CREDITABLE SERVICE (RIF purposes)

ENTRANCE ON DUTY DATE (Present agency)

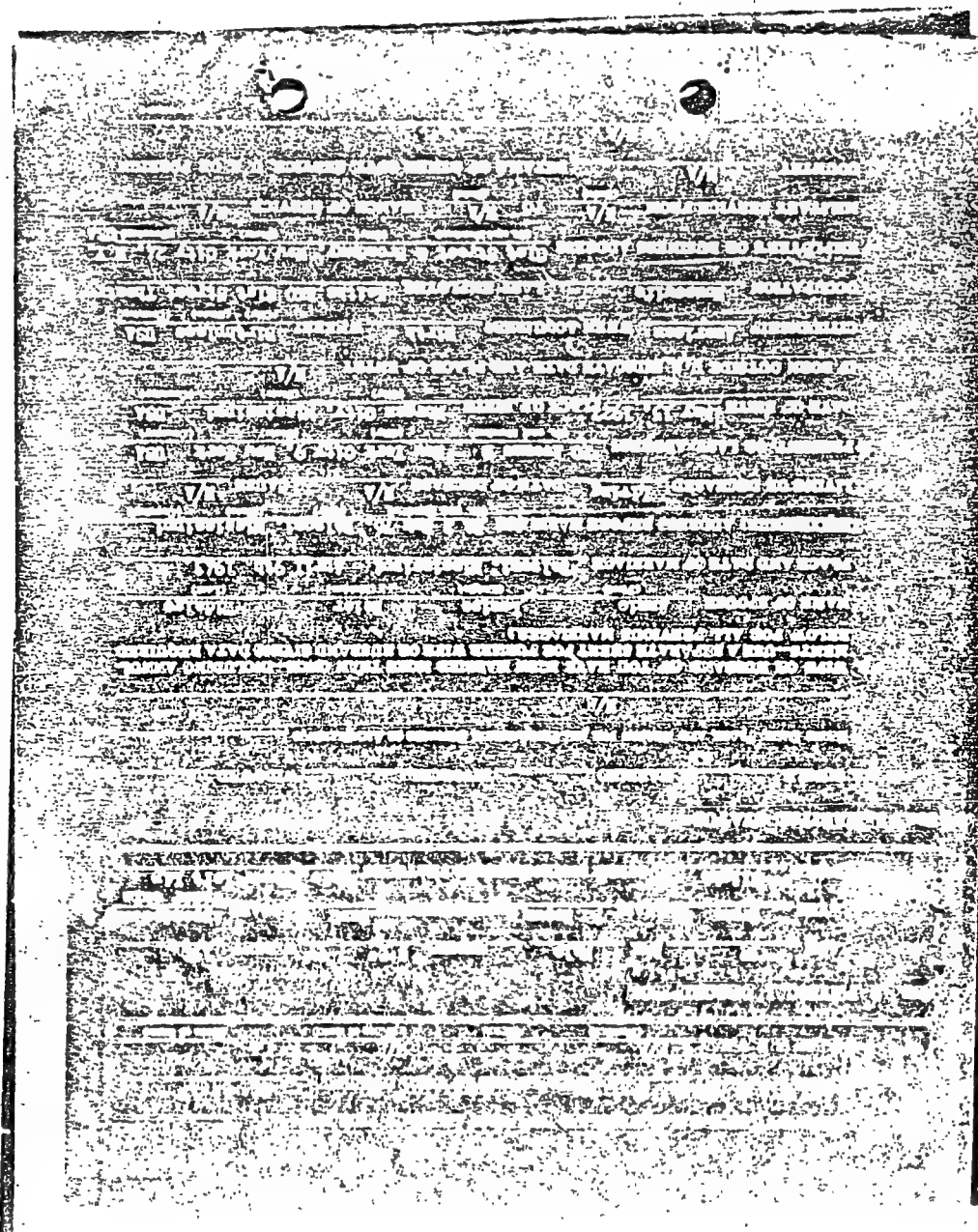
LESS CREDITABLE SERVICE (RIF purposes)

SERVICE COMPUTATION DATE (RIF purposes)

(Enter as the "service computation date" on the employee's "Service Record Card," SF-7)

YEARS	MONTHS	DAYS

REMARKS:



(UNITED STATES DEPARTMENT OF AGRICULTURE)
 OFFICE OF THE SECRETARY
 WASHINGTON, D. C.
 (RECEIVED)
 MAY 19 1919
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1. The first part of the document is a letterhead which includes the name of the organization, the date, and the name of the person to whom the letter is addressed. The letterhead is followed by a salutation and a brief statement of the purpose of the letter.

2. The second part of the document is the body of the letter, which contains the main text of the communication. This section is divided into several paragraphs, each dealing with a different aspect of the subject matter. The paragraphs are written in a clear, concise, and professional manner, and are separated by appropriate spacing and punctuation.

3. The third part of the document is the closing, which includes a signature block and a closing phrase. The signature block contains the name of the person who is sending the letter, and the closing phrase is a polite expression of goodwill. The closing is followed by a reference to the enclosed documents, if any, and a final statement of the sender's intent.

4. The fourth part of the document is the distribution list, which identifies the individuals or organizations to whom the letter is being sent. This section is written in a clear and concise manner, and includes the names and addresses of the recipients. The distribution list is followed by a final statement of the sender's intent, and a signature block.

Part 1. PROTESTANT-LAV

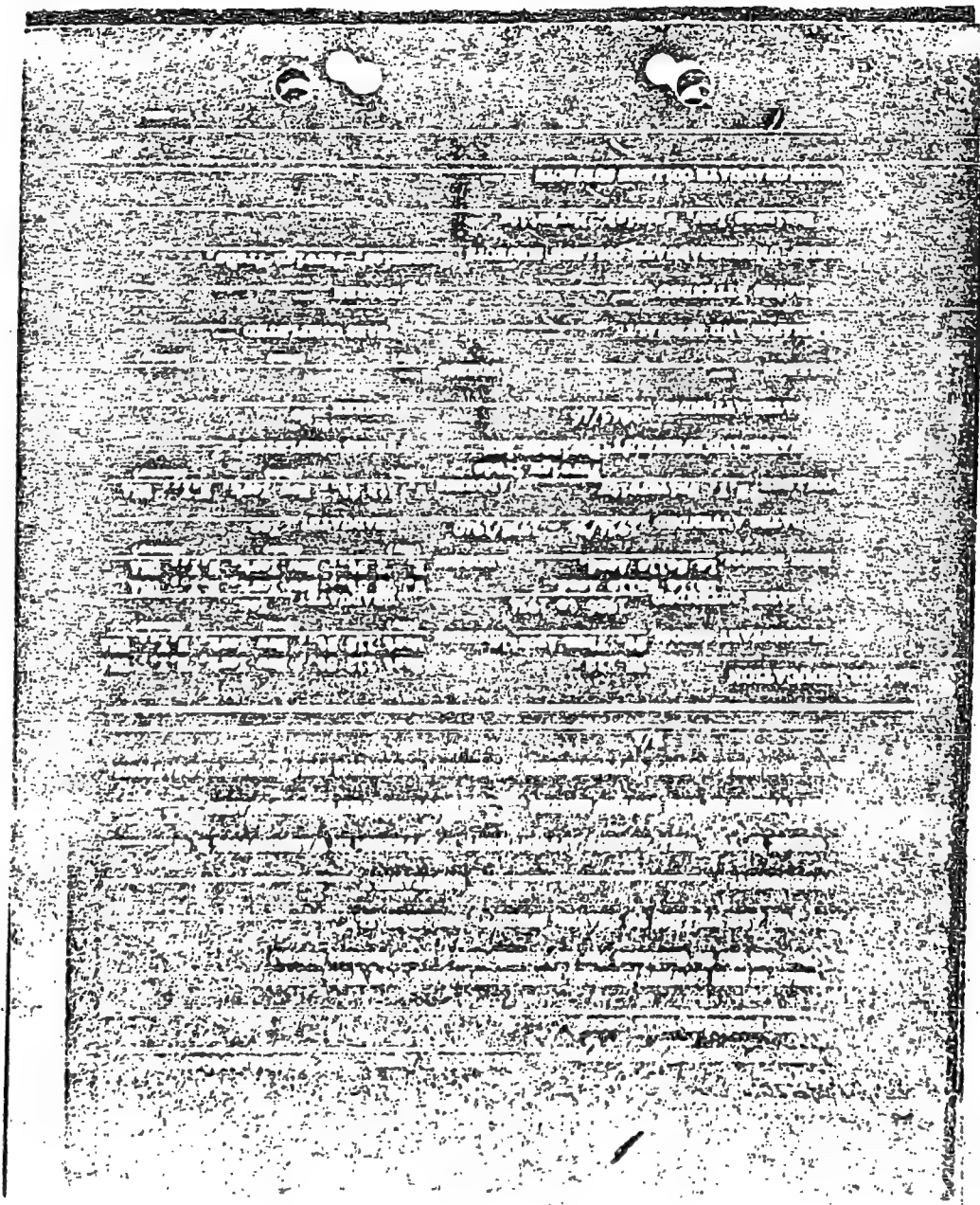
NAME OF PERSON: David
DATE OF BIRTH: 1/1
PLACE OF BIRTH: USA
DATE OF DEATH: 11 Dec 1977
PLACE OF DEATH: Mississippi, USA
DATE OF ENTRY: 1/1
PLACE OF ENTRY: USA
DATE OF DEPARTURE: 1/1
PLACE OF DEPARTURE: USA
DATE OF ARRIVAL: 1/1
PLACE OF ARRIVAL: USA

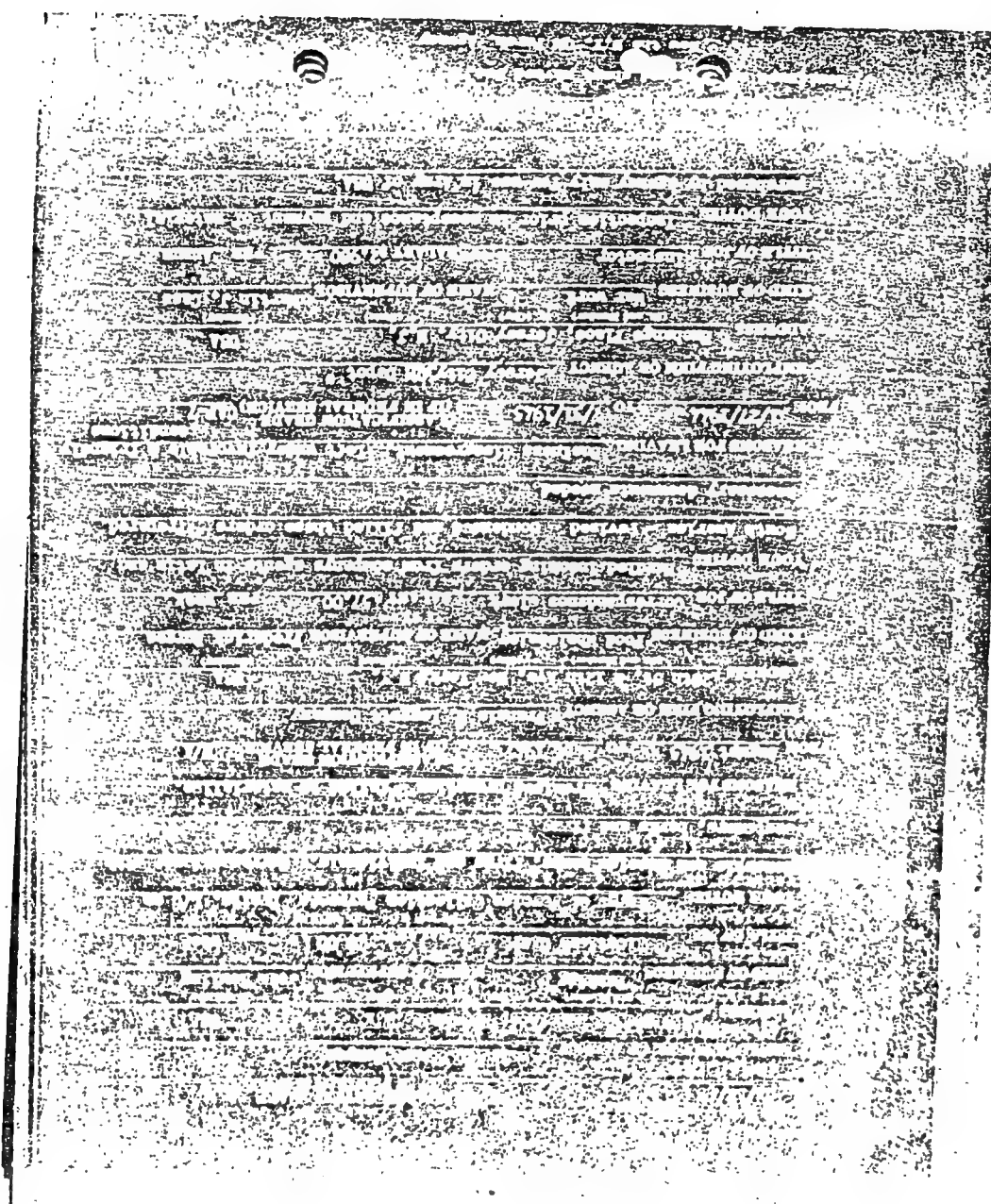
Part 2. RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, IF OF OTHER NATIONALITY OR WHO ARE NOT CITIZENS OF THE UNITED STATES

NAME: David
DATE OF BIRTH: 1/1
PLACE OF BIRTH: USA
DATE OF DEATH: 11 Dec 1977
PLACE OF DEATH: Mississippi, USA
DATE OF ENTRY: 1/1
PLACE OF ENTRY: USA
DATE OF DEPARTURE: 1/1
PLACE OF DEPARTURE: USA
DATE OF ARRIVAL: 1/1
PLACE OF ARRIVAL: USA

Part 3. RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, IF OF OTHER NATIONALITY OR WHO ARE NOT CITIZENS OF THE UNITED STATES

NAME: David
DATE OF BIRTH: 1/1
PLACE OF BIRTH: USA
DATE OF DEATH: 11 Dec 1977
PLACE OF DEATH: Mississippi, USA
DATE OF ENTRY: 1/1
PLACE OF ENTRY: USA
DATE OF DEPARTURE: 1/1
PLACE OF DEPARTURE: USA
DATE OF ARRIVAL: 1/1
PLACE OF ARRIVAL: USA





NAME		ADDRESS		CITY		STATE		ZIP	
1	JOHN DOE	123 MAIN ST	ANYTOWN	CA	90210				
2	JANE DOE	456 MAIN ST	ANYTOWN	CA	90210				
3	JOHN DOE	789 MAIN ST	ANYTOWN	CA	90210				
4	JANE DOE	101 MAIN ST	ANYTOWN	CA	90210				
5	JOHN DOE	202 MAIN ST	ANYTOWN	CA	90210				
6	JANE DOE	303 MAIN ST	ANYTOWN	CA	90210				
7	JOHN DOE	404 MAIN ST	ANYTOWN	CA	90210				
8	JANE DOE	505 MAIN ST	ANYTOWN	CA	90210				
9	JOHN DOE	606 MAIN ST	ANYTOWN	CA	90210				
10	JANE DOE	707 MAIN ST	ANYTOWN	CA	90210				
11	JOHN DOE	808 MAIN ST	ANYTOWN	CA	90210				
12	JANE DOE	909 MAIN ST	ANYTOWN	CA	90210				
13	JOHN DOE	1010 MAIN ST	ANYTOWN	CA	90210				
14	JANE DOE	1111 MAIN ST	ANYTOWN	CA	90210				
15	JOHN DOE	1212 MAIN ST	ANYTOWN	CA	90210				
16	JANE DOE	1313 MAIN ST	ANYTOWN	CA	90210				
17	JOHN DOE	1414 MAIN ST	ANYTOWN	CA	90210				
18	JANE DOE	1515 MAIN ST	ANYTOWN	CA	90210				
19	JOHN DOE	1616 MAIN ST	ANYTOWN	CA	90210				
20	JANE DOE	1717 MAIN ST	ANYTOWN	CA	90210				
21	JOHN DOE	1818 MAIN ST	ANYTOWN	CA	90210				
22	JANE DOE	1919 MAIN ST	ANYTOWN	CA	90210				
23	JOHN DOE	2020 MAIN ST	ANYTOWN	CA	90210				
24	JANE DOE	2121 MAIN ST	ANYTOWN	CA	90210				
25	JOHN DOE	2222 MAIN ST	ANYTOWN	CA	90210				
26	JANE DOE	2323 MAIN ST	ANYTOWN	CA	90210				
27	JOHN DOE	2424 MAIN ST	ANYTOWN	CA	90210				
28	JANE DOE	2525 MAIN ST	ANYTOWN	CA	90210				
29	JOHN DOE	2626 MAIN ST	ANYTOWN	CA	90210				
30	JANE DOE	2727 MAIN ST	ANYTOWN	CA	90210				
31	JOHN DOE	2828 MAIN ST	ANYTOWN	CA	90210				
32	JANE DOE	2929 MAIN ST	ANYTOWN	CA	90210				
33	JOHN DOE	3030 MAIN ST	ANYTOWN	CA	90210				
34	JANE DOE	3131 MAIN ST	ANYTOWN	CA	90210				
35	JOHN DOE	3232 MAIN ST	ANYTOWN	CA	90210				
36	JANE DOE	3333 MAIN ST	ANYTOWN	CA	90210				
37	JOHN DOE	3434 MAIN ST	ANYTOWN	CA	90210				
38	JANE DOE	3535 MAIN ST	ANYTOWN	CA	90210				
39	JOHN DOE	3636 MAIN ST	ANYTOWN	CA	90210				
40	JANE DOE	3737 MAIN ST	ANYTOWN	CA	90210				
41	JOHN DOE	3838 MAIN ST	ANYTOWN	CA	90210				
42	JANE DOE	3939 MAIN ST	ANYTOWN	CA	90210				
43	JOHN DOE	4040 MAIN ST	ANYTOWN	CA	90210				
44	JANE DOE	4141 MAIN ST	ANYTOWN	CA	90210				
45	JOHN DOE	4242 MAIN ST	ANYTOWN	CA	90210				
46	JANE DOE	4343 MAIN ST	ANYTOWN	CA	90210				
47	JOHN DOE	4444 MAIN ST	ANYTOWN	CA	90210				
48	JANE DOE	4545 MAIN ST	ANYTOWN	CA	90210				
49	JOHN DOE	4646 MAIN ST	ANYTOWN	CA	90210				
50	JANE DOE	4747 MAIN ST	ANYTOWN	CA	90210				
51	JOHN DOE	4848 MAIN ST	ANYTOWN	CA	90210				
52	JANE DOE	4949 MAIN ST	ANYTOWN	CA	90210				
53	JOHN DOE	5050 MAIN ST	ANYTOWN	CA	90210				
54	JANE DOE	5151 MAIN ST	ANYTOWN	CA	90210				
55	JOHN DOE	5252 MAIN ST	ANYTOWN	CA	90210				
56	JANE DOE	5353 MAIN ST	ANYTOWN	CA	90210				
57	JOHN DOE	5454 MAIN ST	ANYTOWN	CA	90210				
58	JANE DOE	5555 MAIN ST	ANYTOWN	CA	90210				
59	JOHN DOE	5656 MAIN ST	ANYTOWN	CA	90210				
60	JANE DOE	5757 MAIN ST	ANYTOWN	CA	90210				
61	JOHN DOE	5858 MAIN ST	ANYTOWN	CA	90210				
62	JANE DOE	5959 MAIN ST	ANYTOWN	CA	90210				
63	JOHN DOE	6060 MAIN ST	ANYTOWN	CA	90210				
64	JANE DOE	6161 MAIN ST	ANYTOWN	CA	90210				
65	JOHN DOE	6262 MAIN ST	ANYTOWN	CA	90210				
66	JANE DOE	6363 MAIN ST	ANYTOWN	CA	90210				
67	JOHN DOE	6464 MAIN ST	ANYTOWN	CA	90210				
68	JANE DOE	6565 MAIN ST	ANYTOWN	CA	90210				
69	JOHN DOE	6666 MAIN ST	ANYTOWN	CA	90210				
70	JANE DOE	6767 MAIN ST	ANYTOWN	CA	90210				
71	JOHN DOE	6868 MAIN ST	ANYTOWN	CA	90210				
72	JANE DOE	6969 MAIN ST	ANYTOWN	CA	90210				
73	JOHN DOE	7070 MAIN ST	ANYTOWN	CA	90210				
74	JANE DOE	7171 MAIN ST	ANYTOWN	CA	90210				
75	JOHN DOE	7272 MAIN ST	ANYTOWN	CA	90210				
76	JANE DOE	7373 MAIN ST	ANYTOWN	CA	90210				
77	JOHN DOE	7474 MAIN ST	ANYTOWN	CA	90210				
78	JANE DOE	7575 MAIN ST	ANYTOWN	CA	90210				
79	JOHN DOE	7676 MAIN ST	ANYTOWN	CA	90210				
80	JANE DOE	7777 MAIN ST	ANYTOWN	CA	90210				
81	JOHN DOE	7878 MAIN ST	ANYTOWN	CA	90210				
82	JANE DOE	7979 MAIN ST	ANYTOWN	CA	90210				
83	JOHN DOE	8080 MAIN ST	ANYTOWN	CA	90210				
84	JANE DOE	8181 MAIN ST	ANYTOWN	CA	90210				
85	JOHN DOE	8282 MAIN ST	ANYTOWN	CA	90210				
86	JANE DOE	8383 MAIN ST	ANYTOWN	CA	90210				
87	JOHN DOE	8484 MAIN ST	ANYTOWN	CA	90210				
88	JANE DOE	8585 MAIN ST	ANYTOWN	CA	90210				
89	JOHN DOE	8686 MAIN ST	ANYTOWN	CA	90210				
90	JANE DOE	8787 MAIN ST	ANYTOWN	CA	90210				
91	JOHN DOE	8888 MAIN ST	ANYTOWN	CA	90210				
92	JANE DOE	8989 MAIN ST	ANYTOWN	CA	90210				
93	JOHN DOE	9090 MAIN ST	ANYTOWN	CA	90210				
94	JANE DOE	9191 MAIN ST	ANYTOWN	CA	90210				
95	JOHN DOE	9292 MAIN ST	ANYTOWN	CA	90210				
96	JANE DOE	9393 MAIN ST	ANYTOWN	CA	90210				
97	JOHN DOE	9494 MAIN ST	ANYTOWN	CA	90210				
98	JANE DOE	9595 MAIN ST	ANYTOWN	CA	90210				
99	JOHN DOE	9696 MAIN ST	ANYTOWN	CA	90210				
100	JANE DOE	9797 MAIN ST	ANYTOWN	CA	90210				

[The page contains several lines of extremely faint, illegible text, likely bleed-through from the reverse side. The text appears to be organized into sections, possibly separated by horizontal lines or bullet points, but no specific words or phrases can be discerned.]

[illegible]

NAME OF DEFENDANT

NAME OF DEFENDANT

NAME OF DEFENDANT

NAME OF DEFENDANT

NAME OF DEFENDANT

DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF OR HAVE YOU SUPPORTED ANY POLITICAL PARTY OR ORGANIZATION WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT IN THE UNITED STATES?

IF YOU HAVE ANSWERED "YES" TO ANY OF THE ABOVE QUESTIONS, PLEASE ANSWER THE FOLLOWING:

1. NAME OF PARTY OR ORGANIZATION

2. ADDRESS OF PARTY OR ORGANIZATION

3. DATE OF JOINING PARTY OR ORGANIZATION

4. POSITION HELD IN PARTY OR ORGANIZATION

5. DURATION OF MEMBERSHIP

6. NAME OF PARTY OR ORGANIZATION

7. ADDRESS OF PARTY OR ORGANIZATION

8. DATE OF JOINING PARTY OR ORGANIZATION

9. POSITION HELD IN PARTY OR ORGANIZATION

10. DURATION OF MEMBERSHIP

11. NAME OF PARTY OR ORGANIZATION

12. ADDRESS OF PARTY OR ORGANIZATION

13. DATE OF JOINING PARTY OR ORGANIZATION

14. POSITION HELD IN PARTY OR ORGANIZATION

15. DURATION OF MEMBERSHIP

16. NAME OF PARTY OR ORGANIZATION

17. ADDRESS OF PARTY OR ORGANIZATION

18. DATE OF JOINING PARTY OR ORGANIZATION

19. POSITION HELD IN PARTY OR ORGANIZATION

20. DURATION OF MEMBERSHIP

21. NAME OF PARTY OR ORGANIZATION

22. ADDRESS OF PARTY OR ORGANIZATION

23. DATE OF JOINING PARTY OR ORGANIZATION

24. POSITION HELD IN PARTY OR ORGANIZATION

25. DURATION OF MEMBERSHIP

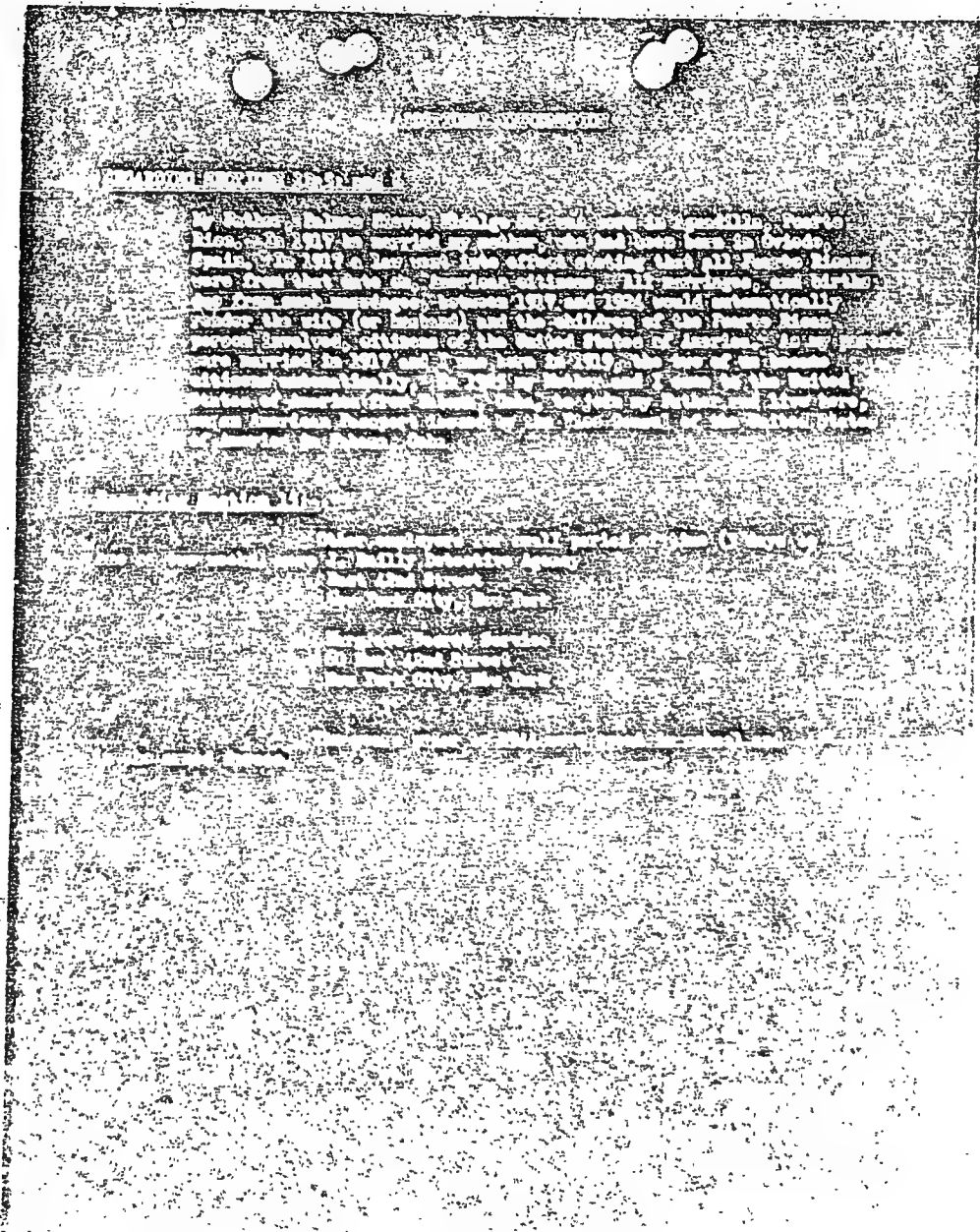
26. NAME OF PARTY OR ORGANIZATION

27. ADDRESS OF PARTY OR ORGANIZATION

28. DATE OF JOINING PARTY OR ORGANIZATION

29. POSITION HELD IN PARTY OR ORGANIZATION

30. DURATION OF MEMBERSHIP



1. The Committee on the Assassinations of President John F. Kennedy has been established to investigate the assassination of President John F. Kennedy and to determine the facts and circumstances surrounding the assassination.

2. The Committee is composed of the following members: [List of members]

3. The Committee is authorized to conduct such investigations and to make such recommendations as it deems appropriate.

4. The Committee is authorized to call upon any person for information and to require the production of any documents or other evidence in his possession or control.

5. The Committee is authorized to hold public hearings and to receive testimony from any person.

6. The Committee is authorized to make such recommendations as it deems appropriate to the President.

7. The Committee is authorized to make such recommendations as it deems appropriate to the Congress.

8. The Committee is authorized to make such recommendations as it deems appropriate to the public.

9. The Committee is authorized to make such recommendations as it deems appropriate to the world.

10. The Committee is authorized to make such recommendations as it deems appropriate to the universe.

PERSONAL HISTORY STATEMENT

Instructions: 1. Answer all questions completely. If question is not applicable write "NA." Write "unknown" only if you do not know the answer and cannot obtain the answer from personal records. Use the blank pages at the end of this form for extra details on any question or questions for which you do not have sufficient room.

2. Type, print, or write carefully; illegible or incomplete forms will not receive consideration.

HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS? _____

(Yes or No)

Sec. 1. PERSONAL BACKGROUND

A. FULL NAME Mr. XXX Balmes Nieves Ridalgo, Jr. XXX
(Use No Initials) (First) (Middle) (Last)

Telephone:

Office NA

Ext. NA

Home NA

PRESENT ADDRESS House number 60, 94th St., East, _____
(St. and Number) (City) (State) (Country)

PERMANENT ADDRESS NA
(St. and Number) (City) (State) (Country)

B. NICKNAME "Barney" "Bal" **WHAT OTHER NAMES HAVE YOU USED?** See remarks

UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE

NAMES? See remarks

HOW LONG? See remarks **IF A LEGAL CHANGE, GIVE PARTICULARS.**

No
(Where?) (By what authority)

C. DATE OF BIRTH 27 May 1919 **PLACE OF BIRTH** Havana, Cuba
(City) (State) (Country)

D. PRESENT CITIZENSHIP U. S. **BY BIRTH?** NA **BY MARRIAGE?** NA
(Country)

BY NATURALIZATION CERTIFICATE NO. NA **ISSUED** NA **BY** NA
(Date) (Country)

AT See remarks
(City) (State) (Country)

HAVE YOU HAD A PREVIOUS NATIONALITY? No
(Yes or No) (Country)

HELD BETWEEN WHAT DATES? NA **TO** NA **ANY OTHER NATIONALITY?** NA
(Country)

GIVE PARTICULARS NA

HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP? No **GIVE PARTICULARS:**

NA

(2)

E. IF BORN OUTSIDE U. S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? March 1924PORT OF ENTRY? NYC, NY ON PASSPORT OF WHAT COUNTRY? U. S.LAST U. S. VISA None
(Number) (Type) (Place of Issue) (Date of Issue)

SEC. 2. PHYSICAL DESCRIPTION

AGE 38 SEX Male HEIGHT 5' 9" WEIGHT 145
EYES Brown HAIR Dark Brown COMPLEXION Dark SCARS under chin
BUILD slight OTHER DISTINGUISHING FEATURES Mole. Upper left lip.

SEC. 3. MARITAL STATUS

A. SINGLE ☐ MARRIED ☒ DIVORCED ☐ WIDOWED ☐

STATE DATE, PLACE, AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS

B. WIFE OR HUSBAND (IF YOU HAVE BEEN MARRIED MORE THAN ONCE—INCLUDING ANNULMENTS—USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND GIVING DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES.)

NAME OF SPOUSE Annie Louise Beier Hidalgo
(First) (Middle) (Maiden) (Last)PLACE AND DATE OF MARRIAGE Belzoni, Mississippi - 9 April 1943~~WIFE (OR HER)~~ ADDRESS BEFORE MARRIAGE Rt. 2, Box 76, Belzoni, Mississippi, USA
(St. and Number) (City) (State) (Country)LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NAPRESENT, OR LAST, ADDRESS Same as applicant
(St. and Number) (City) (State) (Country)DATE OF BIRTH 15 May 1927 PLACE OF BIRTH Morgan City, Mississippi, USA
(City) (State) (Country)IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NACITIZENSHIP US WHEN ACQUIRED? Birth WHERE? USA
(City) (State) (Country)OCCUPATION File Clerk LAST EMPLOYER ClassifiedEMPLOYER'S OR BUSINESS ADDRESS Classified
(St. and Number) (City) (State) (Country)MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA
(Date) (Date)COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGNNA

SEC. 4. CHILDREN OR DEPENDENTS (Include partial dependents):

1. NAME Ius Maria Hidalgo RELATIONSHIP Daughter AGE 12
 CITIZENSHIP U. S. ADDRESS Same as applicant
 (St. and Number) (City) (State) (Country)
 2. NAME Frances Rebecca Hidalgo RELATIONSHIP Daughter AGE 7
 CITIZENSHIP U. S. ADDRESS Same as applicant
 (St. and Number) (City) (State) (Country)
 3. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
 (St. and Number) (City) (State) (Country)

(also dependent)

SEC. 5. FATHER (Give the same information for stepfather and/or guardian on a separate sheet)

FULL NAME Baldes Marques Hidalgo
 (First) (Middle) (Last)
 LIVING OR DECEASED Living DATE OF DECEASE _____ CAUSE NA
 PRESENT, OR LAST, ADDRESS Same as applicant
 (St. and Number) (City) (State) (Country)
 DATE OF BIRTH December 1920 PLACE OF BIRTH Aguadilla, Puerto Rico
 (City) (State) (Country)
 IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY 1923 (March) NYC, NY
 CITIZENSHIP U. S. WHEN ACQUIRED? Birth WHERE? Puerto Rico
 (City) (State) (Country)
 OCCUPATION Retired LAST EMPLOYER Do not remember
 EMPLOYER'S OR OWN BUSINESS ADDRESS None
 (St. and Number) (City) (State) (Country)
 MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA
 (Date) (Date)
 COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN
NA

SEC. 6. MOTHER (Give the same information for stepmother on a separate sheet)

FULL NAME Frances Beatrice Hidalgo
 (First) (Middle) (Last)
 LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA
 PRESENT, OR LAST, ADDRESS Same as applicant
 (St. and Number) (City) (State) (Country)
 DATE OF BIRTH 12 Jan. 1892 PLACE OF BIRTH Orledo, Spain
 CITIZENSHIP U. S. WHEN ACQUIRED? Marriage 1917 WHERE? Havana, Cuba
 (City) (State) (Country)
 IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY March 1924, NYC, NY, USA

(4)

OCCUPATION Retired LAST EMPLOYER Leonid De Lescinski

EMPLOYER'S OR OWN BUSINESS ADDRESS 48 St. NYC, NY
(St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA

COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN
NA

SEC. 7. BROTHERS AND SISTERS (Including half-, step-, and adopted brothers and sisters):

1. FULL NAME	(First)	(Middle)	(Last)	AGE
PRESENT ADDRESS	(St. and Number)	(City)	(State)	(Country)
(Citizenship)				
2. FULL NAME	(First)	(Middle)	(Last)	AGE
PRESENT ADDRESS	(St. and Number)	(City)	(State)	(Country)
(Citizenship)				
3. FULL NAME	(First)	(Middle)	(Last)	AGE
PRESENT ADDRESS	(St. and Number)	(City)	(State)	(Country)
(Citizenship)				
4. FULL NAME	(First)	(Middle)	(Last)	AGE
PRESENT ADDRESS	(St. and Number)	(City)	(State)	(Country)
(Citizenship)				
5. FULL NAME	(First)	(Middle)	(Last)	AGE
PRESENT ADDRESS	(St. and Number)	(City)	(State)	(Country)
(Citizenship)				

SEC. 8. FATHER-IN-LAW

FULL NAME Henry B. Poier
(First) (Middle) (Last)
LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA
PRESENT, OR LAST, ADDRESS 210 California Avenue, Ioland, Mississippi, USA
(St. and Number) (City) (State) (Country)
DATE OF BIRTH 1895 PLACE OF BIRTH USA
IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NA
CITIZENSHIP US WHEN ACQUIRED? Birth WHERE? USA
(City) (State) (Country)
OCCUPATION Labore LAST EMPLOYER Unknown

SEC. 9. MOTHER-IN-LAW

FULL NAME Emma Rebecca Peior
(First) (Middle) (Last)
 LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA
 PRESENT, OR LAST, ADDRESS 210 California Avenue, Ieland, Mississippi, USA
(St. and Number) (City) (State) (Country)
 DATE OF BIRTH 1893 PLACE OF BIRTH USA
 IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NA
 CITIZENSHIP U. S. WHEN ACQUIRED? Birth WHERE? U.S.A.
(City) (State) (Country)
 OCCUPATION Housewife LAST EMPLOYER NA

SEC. 10. RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, WHO EITHER LIVE ABROAD OR WHO ARE NOT CITIZENS OF THE UNITED STATES:

See
remarks

1. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
 2. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
 3. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)

SEC. 11. RELATIVES BY BLOOD OR MARRIAGE IN THE MILITARY OR CIVIL SERVICE OF THE U. S. OR OF A FOREIGN GOVERNMENT:

NONE

1. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
 TYPE AND LOCATION OF SERVICE (IF KNOWN) _____
 2. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
 TYPE AND LOCATION OF SERVICE (IF KNOWN) _____
 3. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
(St. and Number) (City) (State) (Country)
 TYPE AND LOCATION OF SERVICE (IF KNOWN) _____

SEC. 12. POSITION DATA

A. KIND OF POSITION APPLIED FOR See covering dispatch reference

B. WHAT IS THE LOWEST ANNUAL ENTRANCE SALARY YOU WILL ACCEPT? \$5000 P/A
(You Will Not Be Considered For Any Position With A Lower Entrance Salary.)

C. IF YOU ARE WILLING TO TRAVEL, SPECIFY: OCCASIONALLY Yes
FREQUENTLY CONSTANTLY X

D. CHECK IF YOU WILL ACCEPT APPOINTMENT, IF OFFERED: IN WASHINGTON, D. C. X
ANYWHERE IN THE UNITED STATES X OUTSIDE THE UNITED STATES X

E. IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, SPECIFY LOCATIONS:
.....

SEC. 13. EDUCATION

ELEMENTARY SCHOOL St. Thomas Apostolic Address NYC NY USA
(City) (State) (Country)
DATES ATTENDED 1926-1934 GRADUATE? Yes

HIGH SCHOOL La. Salle Academy Address 2nd St. and 2nd Avenue NYC, NY USA
(City) (State) (Country)
DATES ATTENDED 1936-1940 GRADUATE? Yes

COLLEGE University Address Washington Square, NYC, NY, USA
Foreign Trade and (City) (State) (Country)
MAJOR AND SPECIALTY Business Law YEARS COMPLETED Two (Night School)

DATES ATTENDED 1944-1945 DEGREE No

COLLEGE ADDRESS
(City) (State) (Country)
MAJOR AND SPECIALTY YEARS COMPLETED
DATES ATTENDED DEGREE

CHIEF UNDERGRADUATE COLLEGE SUBJECTS

CHIEF GRADUATE COLLEGE SUBJECTS

Sec. 14. ACTIVE U. S. OR FOREIGN MILITARY SERVICE

U. S. Army Cpl. 1940-1943
(Country) (Service) (Rank) (Dates of Service)
Camp Hale, Colorado 202 149766 Honorable
(Last Station) (Postal Number) (Type of Discharge)
 REMARKS: None
 Do not remember
 SELECTIVE SERVICE BOARD NUMBER ADDRESS
 IF DEFERRED GIVE REASON NA
 INDICATE MEMBERSHIP IN MILITARY RESERVE ORGANIZATIONS NA

Sec. 15. CHRONOLOGICAL HISTORY OF EMPLOYMENT FOR PAST 15 YEARS. ACCOUNT FOR ALL PERIODS. INCLUDE CASUAL EMPLOYMENT. INCLUDE ALSO PERIODS OF UNEMPLOYMENT. GIVE ADDRESSES AND STATE WHAT YOU DID DURING PERIODS OF UNEMPLOYMENT. LIST LAST POSITION FIRST. (List all civilian employment by a foreign government, regardless of dates.)

FROM Feb. 1952 TO Present CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) GS-11
 EMPLOYING FIRM OR AGENCY See covering dispatch reference
 ADDRESS See covering dispatch reference
(St. and Number) (City) (State) (Country)
 KIND OF BUSINESS U. S. Govt. NAME OF SUPERVISOR See covering dispatch
 TITLE OF JOB See covering dispatch SALARY \$6390.00 PER annum
 YOUR DUTIES See covering dispatch reference

REASONS FOR LEAVING
 FROM January 1951 TO February 1952 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) GS-7
 EMPLOYING FIRM OR AGENCY NY Q Procurement Agency
 ADDRESS 111 East 16th Street NYC, NY, USA
(St. and Number) (City) (State) (Country)
 KIND OF BUSINESS U. S. Govt. NAME OF SUPERVISOR Do not remember
 TITLE OF JOB Inspector SALARY \$3525.00 PER annum
 YOUR DUTIES Inspecting material being purchased by U. S. Govt. specifically the U. S. Army.
 REASONS FOR LEAVING To obtain present position.

(8)

FROM July 1950 TO January 1951 CLASSIFICATION GRADE
(IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY American Trust Company

ADDRESS Wall Street, New York City, NY, USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Banking NAME OF SUPERVISOR Do not remember

TITLE OF JOB Collections clerk SALARY \$50.00 PER week

YOUR DUTIES Export banking clerical work

REASONS FOR LEAVING Left for higher paying work

FROM January 1948 TO May 1950 CLASSIFICATION GRADE
(IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY Colonial Trust Company

ADDRESS 6th Avenue and 45th Street, NYC, NY, USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Banking NAME OF SUPERVISOR Do not remember

TITLE OF JOB Collections clerk SALARY \$50.00 PER week

YOUR DUTIES Export banking clerical work.

REASONS FOR LEAVING Promised promotion failed to materialize.

FROM August 1945 TO September 1947 CLASSIFICATION GRADE
(IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY Francis H. Leggett Inc.

ADDRESS 28th Street and 12th Avenue, NYC, NY, USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Wholesale NAME OF SUPERVISOR Do not remember
Grocery house.

TITLE OF JOB Correspondence clerk SALARY \$ 57.00 PER week

YOUR DUTIES Export correspondence clerical duties.

REASONS FOR LEAVING Disatisfied with type of work.

SEC. 16. HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION? HAVE YOU LEFT A POSITION UNDER CIRCUMSTANCES WHICH YOU DESIRE TO EXPLAIN? GIVE DETAILS:

No

SEC. 17. GENERAL QUALIFICATIONS

A. FOREIGN LANGUAGES (STATE DEGREE OR PROFICIENCY AS "SLIGHT," "FAIR," OR "FLUENT")

LANGUAGE Spanish SPEAK Fluent READ .. Fluent .. WRITE .. Fluent ..

LANGUAGE Portuguese SPEAK Slight READ Fair WRITE Slight ..

LANGUAGE SPEAK READ WRITE

B. LIST ALL SPORTS AND HOBBIES WHICH INTEREST YOU: INDICATE DEGREE OF PROFICIENCY IN EACH:

Judo - Have attained "yellow belt" rank

Photography - Very good degree of proficiency

Bowling - Fair degree of proficiency

Philately - Fair degree of proficiency

Fishing (no comment)

C. HAVE YOU ANY QUALIFICATIONS, AS A RESULT OF TRAINING OR EXPERIENCE, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION?

Yes, See covering dispatch reference.

D. LIST ANY SPECIAL SKILLS YOU POSSESS AND MACHINES AND EQUIPMENT YOU CAN USE, SUCH AS OPERATION OF SHORT-WAVE RADIO, MULTILITH, COMPTOMETER, KEY PUNCH, TURRET LATHE, SCIENTIFIC OR PROFESSIONAL DEVICES:

All photographic devices.

APPROXIMATE NUMBER OF WORDS PER MINUTE IN TYPING 30 SHORTHAND 0

(10)

E. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION, SUCH AS PILOT, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, ETC.

IF YES, INDICATE KIND OF LICENSE AND STATE _____ No.

FIRST LIC. OR CERTIFICATE (YR) _____ LATEST LIC. OR CERTIFICATE (YR) _____

F. GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION SUCH AS:

- (1) YOUR MORE IMPORTANT PUBLICATIONS (DO NOT SUBMIT COPIES UNLESS REQUESTED)
- (2) YOUR PATENTS OR INVENTIONS
- (3) PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE
- (4) HONORS AND FELLOWSHIPS RECEIVED

NA

G. HAVE YOU A PHYSICAL HANDICAP, DISEASE, OR OTHER DISABILITY WHICH SHOULD BE CONSIDERED IN ASSIGNING YOU TO WORK? IF ANSWER IS "YES," EXPLAIN:

Yes. I must wear glasses continually.

H. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? IF ANSWER IS "YES," GIVE COMPLETE DETAILS:

No

SEC. 18. GIVE FIVE CHARACTER REFERENCES—IN THE U. S.—WHO KNOW YOU INTIMATELY—(Give residence and business addresses where possible.)

	Street and Number	City	State
1. Edward Lee Anderson	BUS. ADD. See Dispatch reference.		
	RES. ADD.		
2. Willard Galbraith	BUS. ADD. " " "		
	RES. ADD.		
3. Homer Neal	BUS. ADD. " " "		
	RES. ADD.		
4. Andres Rivera	BUS. ADD. " " "		
	RES. ADD.		
5. Joseph Sancho	BUS. ADD. " " "		
	RES. ADD.		

SEC. 19. NAMES OF FIVE PERSONS WHO KNOW YOU SOCIALLY IN THE UNITED STATES—NOT REFERENCES, RELATIVES, SUPERVISORS, OR EMPLOYERS—(Give residence and business addresses where possible.)

	Street and Number	City	State
1. _____	BUS. ADD. _____		
	RES. ADD. _____		
2. _____	BUS. ADD. _____		
	RES. ADD. _____		
3. _____	BUS. ADD. _____		
	RES. ADD. _____		
4. _____	BUS. ADD. _____		
	RES. ADD. _____		
5. _____	BUS. ADD. _____		
	RES. ADD. _____		

See
remarks

SEC. 20. GIVE THREE NEIGHBORS AT YOUR LAST NORMAL RESIDENCE IN THE U. S.—(Give residence and business addresses where possible.)

	Street and Number	City	State
1. _____	BUS. ADD. _____		
	RES. ADD. _____		
2. _____	BUS. ADD. _____		
	RES. ADD. _____		
3. _____	BUS. ADD. _____		
	RES. ADD. _____		

See
remarks

SEC. 21. FINANCIAL BACKGROUND

- A. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? Yes IF NOT, STATE SOURCES OF OTHER INCOME _____
- B. NAMES AND ADDRESSES OF BANKS WITH WHICH YOU HAVE ACCOUNTS Greenwich Savings Bank, 36th St. and Broadway and 6th Avenue, NYC, NY.

(12)

C. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY? No
GIVE PARTICULARS, INCLUDING COURT: _____

D. GIVE THREE CREDIT REFERENCES—IN THE U. S.

1. NAME _____ ADDRESS _____
(St. and Number) (City) (State)
2. NAME None ADDRESS _____
(St. and Number) (City) (State)
3. NAME _____ ADDRESS _____
(St. and Number) (City) (State)

SEC. 22. RESIDENCES FOR THE PAST 15 YEARS.

FROM April 1952 TO Present Panama Republic of Panama
(St. and number) (City) (State) (Country)
FROM 1949 TO 1952 20 Ave. D, NYC, NY, USA
(St. and number) (City) (State) (Country)
FROM 1944 TO 1948 200 West 82nd St., NYC, NY, USA
(St. and number) (City) (State) (Country)
FROM _____ TO _____
(St. and number) (City) (State) (Country)
FROM _____ TO _____
(St. and number) (City) (State) (Country)
FROM _____ TO _____
(St. and number) (City) (State) (Country)
FROM _____ TO _____
(St. and number) (City) (State) (Country)
FROM _____ TO _____
(St. and number) (City) (State) (Country)

SEC. 23. RESIDENCE OR TRAVEL OUTSIDE OF THE UNITED STATES

A. FROM 1919 TO 1924 Havana, Cuba Country of birth
(City or section) (Country) (Purpose)
FROM 1942 TO 1943 Pacific area US Army
(City or section) (Country) (Purpose)
FROM 1952 TO Present Republic of Panama Work
(City or section) (Country) (Purpose)
FROM _____ TO _____
(City or section) (Country) (Purpose)
FROM _____ TO _____
(City or section) (Country) (Purpose)

SEC. 24. CLUBS, SOCIETIES, AND OTHER ORGANIZATIONS

LIST NAMES AND ADDRESSES OF ALL CLUBS, SOCIETIES, PROFESSIONAL SOCIETIES, EMPLOYEE GROUPS, ORGANIZATIONS OF ANY KIND (INCLUDE MEMBERSHIP IN, OR SUPPORT OF, ANY ORGANIZATION HAVING HEADQUARTERS OR BRANCH IN A FOREIGN COUNTRY) TO WHICH YOU BELONG OR HAVE BELONGED:

1. None
(Name and Chapter) (St. and Number) (City) (State) (Country)
DATES OF MEMBERSHIP: _____
2. _____
(Name and Chapter) (St. and Number) (City) (State) (Country)
DATES OF MEMBERSHIP: _____
3. _____
(Name and Chapter) (St. and Number) (City) (State) (Country)
DATES OF MEMBERSHIP: _____

4. _____
 (Name and Chapter) (St. and Number) (City) (State) (Country)
 DATES OF MEMBERSHIP: _____

5. _____
 (Name and Chapter) (St. and Number) (City) (State) (Country)
 DATES OF MEMBERSHIP: _____

6. _____
 (Name and Chapter) (St. and Number) (City) (State) (Country)
 DATES OF MEMBERSHIP: _____

7. _____
 (Name and Chapter) (St. and Number) (City) (State) (Country)
 DATES OF MEMBERSHIP: _____

SEC. 25. MISCELLANEOUS

A. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED; OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF, OR HAVE YOU SUPPORTED, ANY POLITICAL PARTY OR ORGANIZATION WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT IN THE UNITED STATES?

IF "YES," EXPLAIN: No (See remarks)

B. DO YOU USE, OR HAVE YOU USED, INTOXICANTS? Yes IF SO, TO WHAT

EXTENT? Beer with meals

C. HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, NATURE OF OFFENSE AND DISPOSITION OF CASE:

No

D. HAVE YOU EVER BEEN COURT-MARTIALED WHILE A MEMBER OF THE ARMED FORCES? IF ANSWER IS "YES," GIVE DETAILS BELOW:

No

E. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED FOR EMPLOYMENT SINCE 1940:

Department of Defense

Present Organization

(14)

F. IF, TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAS CONDUCTED AN INVESTIGATION OF YOU, INDICATE BELOW THE NAME OF THAT AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION:

Federal Bureau of Investigation - 1946

This Organisation - 1952

Sec. 26. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME Amie Louise Hidalgo RELATIONSHIP wife

ADDRESS Same as applicant
(No. and Number) (City) (State) (Country)

Sec. 27. YOU ARE INFORMED THAT THE CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED.

ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE NOT MENTIONED ABOVE WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION? IF SO, DESCRIBE. IF NOT, ANSWER "NO."

No

Sec. 28. I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECTION OF MY APPLICATION.

SIGNED AT Pt. Auclair, Canal Zone
(City and State)

DATE 19 July 1957

(Witness)

(Signature of Applicant)

USE THE FOLLOWING PAGES FOR EXTRA DETAILS. NUMBER ACCORDING TO THE NUMBER OF THE QUESTION TO WHICH THEY RELATE. SIGN YOUR NAME AT THE END OF THE ADDED MATERIAL. IF ADDITIONAL SPACE IS REQUIRED USE EXTRA PAGES THE SAME SIZE AS THESE AND SIGN EACH SUCH PAGE.

Section 1A - While an undercover agent for the Federal Bureau of Investigations from 1946 to 1949 I used the name of Bernard Harris to members of the Communist Party of the United States. This information is already on file in this organization.

Section 1D - I became an American citizen at birth through the citizenship of my father. This information is already on file in this organization.

Section 3B - My wife is employed by this organization.

Section 10 - I have many relatives in Spain and Cuba but do not correspond with them and so do not know names, addresses or present status.

Section 18 - All persons mentioned in this section are employees of this organization.

Sections 19

and 20 - Not having lived in the USA for over five years I have lost all contact with old friends, neighbors, etc. I do not know their addresses, status, etc., at this time.

Section 25 - My past connections with any subversive groups and the reasons for such connections is already on file in the files of this organization.

14-00000

RECORD OF
PREVIOUS GOVERNMENT
SERVICE RETURNED TO
FEDERAL RECORDS CENTER IN
ST. LOUIS, MO.

DATE

July 14 71